

University Computer Center VPN Account Request Form

Please attach the following along with this form:

- ☐ Photocopy of UP ID
- ☐ Photocopy of Form 5 (for students) OR ☐ Photocopy of Appointment Letter (for faculty/REPS)
- ☐ Formal letter request addressed to the Director of University Computer Center (for students)
 - For students, letter should be endorsed by adviser and department head

Please fill out the following form completely. Incomplete forms will not be processed.

Check applicable category: ☐ Faculty ☐ Student ☐ REPS ☐ Others

Request Type: ☐ New ☐ Renewal ☐ Deletion

User Information

Full Name:

Department:

Designation (if applicable): Course (if applicable):

Phone Number: Mobile Number:

DILNET account username: Alternate Email:

Purpose of the VPN. Please describe the purpose of the remote access, and the activities to be performed.

Websites/Software to be Accessed. List websites that will be accessed via VPN. If access requires software, identify client software and any licensing considerations associated with its use. Use a separate sheet if necessary.

1.
2.
3.
4.
5.

Supervisor Information. Please provide information regarding the supervisor that will endorse your request.

Name:

Designation: UPD Webmail:

For UCC Use:
Validity Period: _____
VPN Issuer: _____

University Computer Center
VPN Account Request Form

VPN User Agreement

I hereby declare that:

1. The information provided above is correct.
2. The password provided **will be kept safe and will not be shared with others.**
3. Will not be part of any activity and will not disclose any information about UP Diliman Network's (UP DILNET) VPN service that may result in breach of DILNET's facilities.
4. Will not use my VPN account to gain unauthorized access to other DILNET facilities.
5. I am responsible for the safety of my VPN password and computer used for accessing DILNET's VPN. If my password or my computer has been compromised, I will inform the VPN administrator immediately.
6. I agree to be bound by the University rules and regulations including, but not limited to, its Acceptable Use Policy (<http://www.upd.edu.ph/aup>)

I understand my responsibility to respect and maintain confidentiality of all information which I have access through my computer. I understand that my non-compliance with the terms and conditions of DILNET's VPN service may result in the deletion of my VPN account.

Signature over Printed Name

Date

Supervisor Acknowledgment

I acknowledge that the requesting user requires the type of access indicated in this form. I understand that providing remote access to remote users and devices exposes DILNET to certain security risks. As the immediate supervisor, I accept responsibility for monitoring the requesting user's compliance with the university rules and regulations including, but not limited to, its Acceptable Use Policy (<http://www.upd.edu.ph/aup>).

Signature over Printed Name

Date