User Account Request Form

This Request is for: ☐New Account ☐Update* ☐Deactivate*

* Please provide current/previous UserID:_____

USER INFORMATION

Last Name:_____ Full Name:_____ GSFC Code:_____

Location:_____ Phone:_____ Fax:_____

E-mail:_____ ☐ RSA token

Citizenship (and Visa Status if not U.S.)_____

Mailing address:_____

Please check the boxes that describe you:

☐ NASA civil service employee

☐ Contractor...Company Name_____ Contract No._____

☐ Other (student, visiting scientist, etc.)_____

Normal location of access_____ (foreign country, home, office, etc.)

☐ Long Term Login **(must be re-validated annually)**

☐ Temporary Login: ID will expire on_____

☐ Add to ACD mailing list:

Access Code	UserID	Machine
☐	_____	NASA GSFC ACD Unix Cluster:

Access Code
1 = Privileged
2 = Lts. Privileged
3 = User (onsite)
4 = User (offsite)
5 = Email only

Stand alone systems:

Access Code	Machine	UserID
☐	_____	_____
☐	_____	_____

FOR OFFICE USE ONLY

UID:_____ GID:____AUID:_____

User's home machine:_____ Account Status:_____ Type:__

User's home link:_____

User's shell:_____ User's color group:_____

Account authorized by:_____ on:_____ expires:_____

Account created by: @_____ on:_____

Other groups:_____

Acct. Xrefs:_____

Password last changed:_____ Min Chg:_____ Max Chg:_____ Warn:_____ Inact:_____

POP Access:_____ Email aliases:_____

Acct. version_____ by @_____ as of _____

ALL USERS MUST READ AND SIGN THIS STATEMENT

By signing below, the user is indicating that he/she has read, understands, and will comply with the next 3 pages that describe official business use and acceptable use for NASA computer systems according to NPG2810.1 Sections 4.8.2 - 4.8.4 and 4.9, as well as the Rules of Behavior for NASA-administered systems. The following statement is required by NPG2810.1 Section 4.7.7 Figure 4-8 and is also acknowledged by the user's signature below.

Unauthorized use of the computer accounts and computer resources to which I am granted access is a violation of Section 799, Title 18, U.S. Code; constitutes theft; and is punishable by law. I understand that I am the only individual to access these accounts. and will not knowingly permit access by others without written approval. I understand that my misuse of assigned accounts, and my accessing others' accounts without authorization is not allowed. I understand that this/these system(s) and resources are subject to monitoring and recording. I further understand that failure to abide by thse provisions may constitute grounds for termination of access privileges, administrative action, and/or civil or criminal prosecution.

Signature:_____ Date:_____

APPROVAL (Make sure that signature is completed)

ATR/Civil servant Sponsor Concurrence (for contractor and other)	Printed Name/Title	Date

Forms without complete application information and/or required approval will be returned to the user.