

CAMCO Applications Security Controls

Please fill up the blanks below and cross on the box on which you are requesting to have access. After filing up the form, please let asset owner sign, and submit to person-in-charge of information security.

Name of the user:	
Effective Date:	
Position:	
Section / Dept.:	
Job Function:	
Employee ID:	
Email Id:***	

Operator Application

- ☐ 1. Inbound Gate Operator
- ☐ 2. Outbound Gate Operator
- ☐ 3. INGATE SCREENS
- ☐ 4. OUTGATE SCREENS
- ☐ 5. KIOSK SCREENS
- ☐ 6. Print Manager
- ☐ 7. Barrier Operator
- ☐ 8. Service Desk Operator
- ☐ 9. Damage Job Operator
- ☐ 10. Management

Manual Snapshot Operator Application

- ☐ 1. Snapshot Operator

Web Application

- ☐ 1. Snapshot
- ☐ 2. Manage
- ☐ 3. Reports
- ☐ 4. Documentation

I, _____, acknowledge that I have access to above indicated functions in ePortal.

I agree that I will obtain, use or disclose such data only in connection with the performance of my official duties solely for authorized purposes. And I will never ever share my credentials as well, will inform to IT dept. before leaving on Vocation / Exit.

Requested By (User Sign)

Requested Manager (User Sign)

Asset Owner (Name, Sign & Date)

IT use only

Created & Assigned By

IT Manager