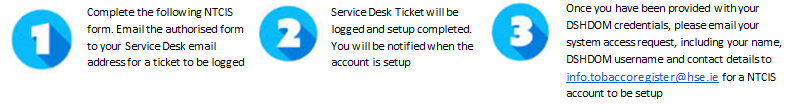
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**National Tobacco Control Information System User Form**

This form is used to request access to The National Control Information system.

\*Denotes mandatory fields or sections. **Incomplete forms will be returned to sender. All sections can be completed by typing the required information in Microsoft Word and using the *TAB* key to move from field to field.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **\*User Details** | **HSE  TUSLA** | | | **Agency / Contractor** | | | 1**HSE** **Personnel Number**  **OR Agency number:** | |
| **\*First Name:** | | **\*Middle Name:** | | | | | **\*Last Name:** | | |
| **Email address:** | | | | **\*Grade / Job Title:** | | | | | |
| **\*Full Location/Work Address:** | | | | | | | | | |
| **\*HSE Telephone / Ext. No / Mobile (HSE):** | | | | | | | | | |
| **2** | **\*Access required** | | | | | | | | |
| I agree to abide by all HSE National IT Security Policies in regard to access, communication and provision of data specified from the following HSE page. Please tick to denote that you agree  I require a DSHDOM (East) domain account access and login in order to access the NTCIS system.  Please tick  **Note:** If you are a non East domain user, you will continue to use your regional or healthirl account to access email, files and other systems if applicable. | | | | | | | | | |
| **3** | **\*Authorisation** | | | | | | | | |
| I have discussed this application with my Line Manager as stated above and have received approval. | | | | | | | | | |
| **I confirm that the HSE National IT Security Policies will be provided to the specified account holder.** | | | | | | **I confirm that I will get the specified account holder to sign the** [**User Declaration**](#User_Declaration) **form (page 2 of this document). I will retain a copy of the signed declaration for audit purposes.** **The User Declaration form is not required to be sent to ICT.** | | | |
| **HSE National IT Security Policies link**  [HSE ICT Policies](http://hsenet.hse.ie/Intranet/OoCIO/Service_Management/PoliciesProcedures/Policies/Policies.html) | | | | | | **These policies cover the correct and appropriate use of the Health Service Executive’s information Technology (I.T.) resources.** | | | |
| **\*Senior Manager Name:**  **Must be authorised by Grade VIII or higher - IT Access Control Policy** [**Link**](https://www.hse.ie/eng/services/publications/pp/ict/) | | | | | | **\*Grade / Job Title:** | | | |
| **\*Telephone or Mobile:** | | | **\*Email Address:** | | | | | | **\*Date:** |
| **Once completed and authorised, please attach to a NSD Self Service request ticket –** [**Link**](https://nsdselfservice.healthirl.net/SelfService.BridgeIT#dashboard) | | | | | | | | | |

**1 If your Personnel number is unavailable, specify ‘TBA’ in this field. Please update the National Service Desk once your Personnel number has been advised or alternatively if you have access to the Self Servie facility, update this information in the profile tile.**

[](https://www.google.ie/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=2ahUKEwiZ05eTvZ3iAhXJSBUIHWIBCLUQjRx6BAgBEAU&url=https://www.hse.ie/eng/&psig=AOvVaw3P64EMEKfce2bGqHsdPsDv&ust=1558007700657446)

This form (page 2) is not required to be sent to ICT. The following relates

to Line Manager’s responsibilities when new or amended access is requested

and should be completed, signed and filed by your department.

User Declaration

I have read and understood the Health Service Executive’s policies governing the use of its ICT resources.

I agree to be bound by the terms therein.

I understand that I may be subject to the HSE’s disciplinary procedures should I fail to comply with said policies.

http://hsenet.hse.ie/Intranet/OoCIO/Service\_Management/PoliciesProcedures/Policies/Policies.html

Tick to denote agreement:

**Note: This form must be retained by the user’s account Manager for audit**

**and control purposes**