**CAG (Citrix Access Gateway) Account Request form**

This form is to request remote access using CAG.

**\*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. The form must be completed by the requesting user and their Senior Line Manager. Please then scan / email the form to your local Service Desk for a ticket to be logged.**

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| **1** | **\*User Details** | | | **HSE  HSE Contractor** | | | | | | | **Prerequisites: You must have an active HSE domain account in order to request CAG access** | | |
| **\*First Name:** | | | | | **Middle Name:** | | | | | | | **\*Last Name:** | |
| **\*1HSE Personnel or Agency Number:** | | | | | | | | | **\*Grade / Job Title:** | | | | |
| **\*Phone / Ext. No/ Mobile:**        **Please provide a direct number in order for us to contact the employee, preferably a HSE mobile number to accelerate application process** | | | | | | | | | | | | | |
| **\*Computer or laptop Asset Tag:** | | | | | | | | **\*Network (domain) Username:** | | | | | |
| **\*Department, full Location / work address:** | | | | | | | | | | | | | |
| **2** | | **Access type** | | | | | **Select one of the following** | | | | | | |
| **Access to a published desktop (limited to Microsoft suite applications, internet browser and network folder access)** | | | | | | | | | | | | | |
| **Or Remote access back to a PC in HSE premises** | | | | | | | | | | | | | |
| **2** | | | **\*Line Manager responsibilities – HSE National IT Security Policy Declaration** | | | | | | | | | | |
| **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) | | | | | | | | | | | | | |

[](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**