UNIVERSITY OF PENNSYLVANIA SCHOOL OF MEDICINE

CCEB GUEST PENNKEY REQUEST FORM

Part 1: Guest Information (please print)

First Name		Last Name	

Your address will be used for secure PennKey correspondence:

Street Address		Apt./ Unit #	

City/State /Zip	

Phone Number		Social Security Number	

Date of Birth (MM/DD/YYYY)		Email Address	@

PennKey Confidentiality Agreement:

As an individual whose position requires interaction with any or all of the University's administrative information systems, I may be provided with direct access to confidential and valuable data and/or use of data systems. In the interest of maintaining the integrity of these systems and of ensuring the security and proper use of University resources, I will maintain the confidentiality of my password for all systems to which I have access. I will maintain in strictest confidence the data to which I have access.

Confidential information will not be shared in any manner with others who are unauthorized to view such data. I will use my access to the University's systems for the sole purpose of conducting official business of the University. I understand that the use of these systems and their data for personal purposes is prohibited. I understand that any abuse of access to the University's systems and their data, any illegal copying of software, and any misuse of the University's equipment may result in disciplinary action, loss of access to the University's systems, and possible sanctions consistent with the University Policy on Adherence to University Policy.

Requestor Signature		Date	/ /

Part 2: Sponsor Information (please sign)
The person named above has my approval for the requested PennKey guest or research access.

Sponsor Name:	**Tom**	Last Name:	**Kelly**

Name of Person Initiating the Request: (*if* different than the Sponsor)**:**

First Name:		Middle Initial:		Last Name:	

Guest's Affiliation (please check one): ☐ **Guest** ☐ **CHOP**

Phone Number:	**(215) 898-0861**	Org. Name:	**CCEB Registrar**

Sponsor Address:	**821 Blockley Hall / 6021**

Email Address:	tkelly@cceb.med.upenn.edu	PennID Number:	**10022150**

Sponsor Signature		Date	/ /