

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		Soci	al Security Number	-	+			
Date of Birth (MM/DD/YYYY)		Email Address		0				

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		1	1	
Signature	Date	/	1	

Part 2: Sponsor Information (please print)

The person named above has my approval for the requested PennKey guest or research access.

Sponsor Name		ldle itial	Last Name	FIATCHAR				
Name of Person Initiating the Request: (if different than the Sponsor):								
First Name		ldle itial	Last Name					
Guest's Affiliation (please check one): Guest Non-Persistent								
Phone Number	215-5/3-0/35	Org. Name PathBioResource						
Sponsor Address:	M-163 John Morgan Bldg, 3620 Hamilton Walk, 19104-6082							
Email Address	luellen@mail.med.upenn.edu				ennID mber	101	30990	
Sponsor Signature				Date		/	/	