

**Justification for Use of CC WebEx Account
Request Form**

USER INFORMATION

Name: _____ Position Title & Grade: _____
Email Address: _____

Bldg./Room #: _____ Department/Branch or Section: _____
Office Phone Number: _____

USER JUSTIFICATION: I am submitting this request because my job responsibilities require me to (check all that apply):

- Host training seminars/sessions for remote attendees (up to 1,000 participant capacity per user/meeting)
- Practice telemedicine with other ICs/sites/hospitals
- Provide remote support to customers and users of a system that I maintain
- An approved medical/personal situation requires me to telework for an extended period of time (please specify anticipated timeframe for access)

SIGNATURES

Signature _____ Date: _____

Immediate Supervisor _____ Date _____

Department Head _____ Date: _____

DECISION

Approved	Disapproved
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Comments:

Chief, IT Budget and Capital Planning

Date