

UCR School of Medicine "Security Intake Form" v.1.0.2

This form is required for any procured service, hardware, or software which may create, store, process, or transmit Institutional Information and/or access IT Resources. It is intended to facilitate communication and assessment.

If advised by IT, Requestor may submit this A) Vendor (Alternate) in lieu of standard A) Vendor.

A) Vendor (Alternate) – Request for Temporary Waiver

Requestor Name: _____ Date: _____

Vendor Name: _____
Contact Name: _____ Contact Email: _____

Description of steps taken to acquire the Intake A:

Reasoning for Waiver:

The vendor has not responded to my reasonable inquiry

The vendor has denied completing the form

Other: _____

Note: please provide evidence to justify as appropriate

By signing below, I attest that the above is true and am confirming that I understand that:

- 1. a lack of vendor responsiveness may pose a risk to the UC
- 2. unknown risk may need exceptional approval
- 3. this waiver merely defers the requirement and may delay procurement processing

Requestor Name: _____ Sign: _____ Date: _____

For Internal Use:
OIT Approver Name: _____ Sign: _____ Date: _____
IT/Security Team(s)
Name: _____ Date: _____
Have you taken reasonable steps to acquire the Intake A?
Were you successful in acquiring the Intake A?
Comments or Explanation: