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| --- | --- | --- | --- | --- | --- | --- |
|  | Information Resource Exception Request | | | | | |
| 1. Requester Information | | | | | | |
| Requester Name: | | Job Title: | | | Date: | |
| Email: | | Phone: (   ) | | | | |
| Office Address: | | City: | State: | | | ZIP: |
| Department: | | Information Resource Owner: | | | | |
| 2. Standard(s)/UAPs for Exception Request | | | | | | |
| *Identify the information security standard(s) with respect to PVAMU UAPs* [*Information Resources*](http://www.pvamu.edu/policies/#s29)  University Administrative Procedure Title:  **Other**: | | | | | | |
| 3. Justification for Exception | | | | | | |
| Explain why the required controls(s) cannot be met: | | | | | | |
| Other relevant information (optional): | | | | | | |
| 4. Alternative Compliance Methods/Compensating Controls | | | | | | |
| Describe proposed controls to mitigate the risks identified above: | | | | | | |
| 5. Recommendations | | | | | | |
| Dept. Head:      Approve  Deny Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:  Information Security Officer: David Maxwell Approve  Deny Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:  IRM:Midhat Asghar Approve  Deny Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: | | | | | | |
| Duration of Exception Granted: (IRM to determine)  3 mo.  6 mo.  12 mo.   Other (specify): | | | | | | |
| 6. Information Security Officer – ISO Use Only | | | | | | |
| This exception request is:  Approved  Denied  Comments/Notes: | | | | | | |
| Information Security Officer Signature: | | | | Date: | | |

Submit form @ [informationsecurity@pvamu.edu](mailto:informationsecurity@pvamu.edu)