



F-35 SOFTWARE IS EVENT LOG (E-FORM)

Select Appropriate Program)			
PROJECT:			
AN ISSM/ISS	O APPROVAL IS RE	QUIRED <u>BEFORE</u> EVERY INST	ALLATION
REQUESTOR:		SYSTEM NUMBER:	
ADMIN/RE:		SYSTEM NAME:	
Ticket Number:		DATE: SYSTEM LOCATION:	
(Select appropriate action)		(Select appropriate action)	
ACTIVITY PERFORMED:		TYPE of SOFTWARE:	
DESCRIPTION OF EVENT:			
INSTRUCTIONS FOR PREPAR		:C4:	to CADE medic lebeline
requirements.	that has the appropriate ci	assification, name, date, and title according	; to SAPF media labeling
2. After software is loaded or	n media, close session or w	rite protect. Annotate with "CS" on media.	
 Scan media for malicious of Once loaded, turn-in for de 			
4. Once loaded, turn-in for de	struction of store in appro-	ved classified container.	
In-House Developed and Deliver	able Software ONLY:		
The requestor validates by signing IS/network for which it is being in	this Software IS Event Lo	g that the software being installed does not	pose known security risks to
13/network for which it is being in	stanca on.		
Print: Signat		<u>D</u>	Pate/Time:
OFTWARE INFORMATION:			
Manufacturer	So	oftware Title	Software Version
			-
			-
ISSM/ISSO Approval:	Signa	ature:	Date/Time:
Admin/RE:		nture:	Date/Time:
Aumm/RE:		itui C.	Date/Time.