



Access Use Policy Form



ACKNOWLEDGEMENT

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☐ User signature

Name:

name...

Designation:

designation...

Department:

KAF Fund Management Sdn Bhd

Date:

mm/dd/yyyy

SUBMIT



APP ACCESS CASE DETAIL

Case Id: XXXXX

User/Actor: XXXXX

Date: XXXXX

Title: New Email Account Creation Form

Details:

Email: xxxxxxxx

Password: xxxxxxxx



APP ACCESS CASE DETAIL

Case Id: XXXXX

User/Actor: XXXXX

Date: XX-XX-XXXX

Title: Confirmation of The Approved Application Access Right Form

Details:

Name: xxxxxxxx

Designation: xxxxxxxx

Department: xxxxxxxx

SERVICE REQUIRED

☒ App1 ☐ App2

☐ App3 ☐ App4

☒ App5 ☐ App6

Date approved:

☒ **HOD signature**

01/01/2019

Status: APPROVED



SUBMITTED & COMPLETED FORM CASE DETAIL

Case Id: XXXXX

User/Actor: XXXXX

Date: XX-XX-XXXX

Title: The Access Use Policy and The Acceptance of Security Policy Forms

Details:

Name:

XXXXXXXXXXXXXXXXXXXXX

Designation:

XXXXXXXXXXXXXXXXXXXXX

Department:

XXXXXXXXXXXXXXXXXXXXX

Date submitted:

01-01-2019

☒ **User signature**

Status: COMPLETE

Sign In



Username

Password

Company

KAF Fund Management Sdn Bhd

▼

LOGIN



User Quick Case View

Form Completion Request Case	2
Submitted & Completed Forms Case	3

Forms To Be Completed List

STEP 1 - COMPLETE THE ACCESS USE POLICY FORM & THE ACCEPTANCE OF SECURITY POLICY FORM	COMPLETE
STEP 2 - COMPLETE THE 2-STEP VERIFICATION SYSTEM FORM	INCOMPLETE
STEP 3 - COMPLETE THE USER ACCEPTANCE TRAINING FORM (APP ACCESS RIGHT)	INCOMPLETE



User Quick Case View

Form Completion Request Case

2

Case Id	Actor	Date	Title Case	
xx	helpdesk	xx-xx-xxxx	xxxx-form	View
xx	xxxxxxx	xx-xx-xxxx	xxxx-form	View

Submitted & Completed Forms Case

3

Forms To Be Completed List

STEP 1 - COMPLETE THE ACCESS USE POLICY FORM & THE ACCEPTANCE OF SECURITY POLICY FORM

STEP 2 - COMPLETE THE 2-STEP VERIFICATION SYSTEM FORM

STEP 3 - COMPLETE THE USER ACCEPTANCE TRAINING FORM (APP ACCESS RIGHT)

COMPLETE

INCOMPLETE

INCOMPLETE



User Quick Case View

Form Completion Request Case

2

Submitted & Completed Forms Case

3

Case Id	Actor	Date	Title Case	Status	
xx	User	xx-xx-xxxx	xxxx-form	Completed/NA	View
xx	User	xx-xx-xxxx	xxxx-form	Completed/NA	View

Forms To Be Completed List

STEP 1 - COMPLETE THE ACCESS USE POLICY FORM & THE ACCEPTANCE OF SECURITY POLICY FORM

COMPLETE

STEP 2 - COMPLETE THE 2-STEP VERIFICATION SYSTEM FORM

INCOMPLETE

STEP 3 - COMPLETE THE USER ACCEPTANCE TRAINING FORM (APP ACCESS RIGHT)

INCOMPLETE



Access Use Policy and Acceptance of Security Policy Form

ACKNOWLEDGEMENT

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☐

User signature

Name:

name...

Designation:

designation...

Department:

KAF Fund Management Sdn Bhd

Date submitted:

mm/dd/yyyy

SUBMIT



NEW FORMS

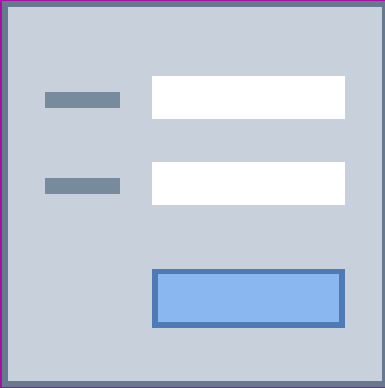


REPORTS

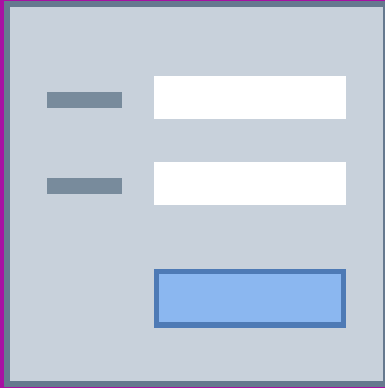


SIGN OUT

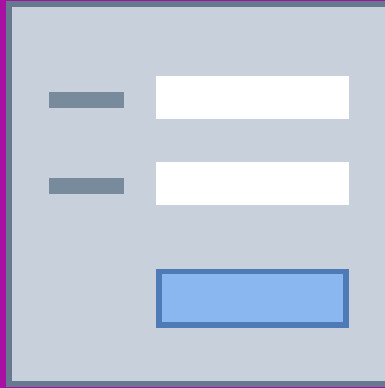




ACCESS USE POLICY FORM &
ACCEPTANCE OF SECURITY POLICY FORM



2-STEP VERIFICATION SYSTEM FORM



USER ACCEPTANCE TRAINING FORM FOR APPLICATION
ACCESS RIGHT