

ANNEXURE 1035-F-0008/A1

Cipla
Corporate

REQUEST FOR ACTIVE DIRECTORY ACCOUNT

Request Type:

☒ ID Creation ☐ Password Reset ☐ User Transfer / Reassignment ☐ Enable ☐ Disable
☐ Temporary ID Creation – Start Date _____ End Date _____

First Name *	SIBONELO	Last Name *	ADCAU GUAYADCA
Employee No. *	87-4473	Department *	Packaging
Location *	Burban	Unit	Cum
Designation	Process Technician	Reporting Manager (Login ID) *	SHAN
		Head of Department (Login ID) *	
ID Type	<input checked="" type="checkbox"/> Employee <input type="checkbox"/> Third Party <input checked="" type="checkbox"/> Login ID <input type="checkbox"/> E-Mail <input type="checkbox"/> Group ID	<input type="checkbox"/> # Existing ID <input checked="" type="checkbox"/> ## Requested ID	
Landline Number *	031 451 3862	Mobile Number	
Group Member Of			
Business Justification			

Declaration for Login ID and Password Usage (If Applicable)

I, the undersigned, hereby declare that the Login ID and password which will be provided to me will be solely used by me following all the security control measures mentioned in SOP 1035-F-0008 and I can be held responsible for the tasks performed using this Login ID and its password. I also declare that I will not share the Login ID and password with anyone else

Signature of the Employee:

Name: SIBONELO ADCAU GUAYADCA

Note: Declaration for Login ID and Password Usage is not required for ID Disable.

Request raised by	(HR / Section Head / User)	SIBONELO
Name	Remarks	for email AND ESS use
Sign / Date		16.03.2022
Approval :		
HOD / Reporting Manager	Shan Kumbale	Noted

Note:

1. * Fields are mandatory.
2. # In case if user already has a Cipla ID.
3. ## Subject to availability.
4. Approval not applicable if request raised by HR.
5. Login ID and Email ID takes maximum of 8 working hours to replicate on the server.