## eHealth Saskatchewan

### DATA and SHARE REQUEST FORM

Use this form to request an increase or a new data share both or restore from a backup this form produced & published
by eHealth Data Centre Infrastructure.
Call the Service Desk 1-888-316-7446 (local 306-337-0600) if you are unclear about any fields below.
Email to: <u>servicedesk@ehealthsask.ca</u>

#### Customer Information

Type of Request (check one): New Share Expand an Existing Share					
Customer's Full Name:			Work Phone #:		
Working Title:			Email Address:		
Facility Name:			Organization:		
Department:					
Data Share Information					
Suggested Share Name:					
Recommended format: ORG	_Purpose_of_Share\$ ex. SH	HA_HR_SouthRural\$	(no spaces, hyp	ohens - und	lerscore only) <sup>i</sup>
Size of space requested or Folder: Default size: 20Gb					
Is this part of a Project: Yes	No Project Na	ame:			
What is required: Does the data need to be backed up? Yes No					
Environment: Pro	duction Test	l am not sure			
Is Data Critical to the organiz	zation <sup>ii</sup> : Yes No	*Can the organi	zation function v	vithout the c	lata for a short period?
Types of files: Office Docum	nents PDF files	Image files D	atabase files	Video	Other types of files
Items Required (Please be specific with details to ensure Storage team can complete your request in a timely manner)					

#### Additional Notes (Any other relevant information)

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Departmental Approver's information*					
Approver's Name Printed:	Work Phone #:				
Working Title:	Email Address:				
Facility Name:	Organization:				
Account Number :					
Service Authorization from Data Centre Infrastructure Manager or Delegate					
Requester Signature	Date (YY/MM/DD)				
I acknowledge that the subscriber is permitted access to the selected services.					
Approved: Yes No Reason:					
Approver Signature	Date (YY/MM/DD)				
*Approver of share requests less than 2 TBs can be approved by the Manag	er anything larger needs Director approval.				

<sup>i</sup> Share names are the purpose of the share and ORG – if none supplied the recommended format will be followed.

<sup>ii</sup> Data criticality dependency on whether historical data is required to function or can be without the data for a short period.

The most recent version of this form can be downloaded at: https://www.ehealthsask.ca/forms