Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. New Enclave Connection Request**

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Region (ex: CONUS, EUR, CENT, PAC): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organizational phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP System Administrator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP System Administrator Phone: COM/DSN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP System Administrator NIPR email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP System Administrator SIPR email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP Management Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP Management Phone: COM/DSN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP Management NIPR email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave VoSIP Management SIPR email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave local Information Assurance Manager Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave local Information Assurance Manager Phone: COM/DSN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave local Information Assurance Manager email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enclave local Information Assurance Manager SIPR email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CCSD(s) of SIPRNet Tier 1-to-Tier 0 connection of servicing Call Manager(s):\_\_\_\_\_\_\_\_

Call Manager Hardware and Software Versions:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cisco CUBE Model and Software Versions if any:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do have a Gatekeeper?\_\_

Associated Customer SIPRNET circuit:\_\_\_\_\_\_\_\_\_

**All requesting enclaves need to follow the guidelines listed in Section 4 of the VoSIP Connection Guide prior to submitting this connection questionnaire to DISA. Also, this form is to be updated and re-submitted to DISA when there is a change to the points of contacts, approved configuration, additional IP address requests, NNX assignment changes and/or any changes that affect the answers on file.**

Mark (x) for response below:

|  |  |  |
| --- | --- | --- |
| Checklist Items: | Yes | No |
| Does the enclave have a signed DAA Letter (IATO/ATO) permitting the implementation of VoSIP on the SIPRNet infrastructure? |  |  |
| Has the enclave updated their SCAO packages to reflect the proposed VoSIP implementation? |  |  |
| Has the local and service level A6/J6/N6/C4/G6 staff approved the 6215.01C request message to join VoSIP? |  |  |
| Does the enclave have a diagram of the requested VoSIP architecture? |  |  |
| Has the initial and projected growth (1, 3, and 5-year) been identified in the format outlined in Section 4 of the VoSIP Connection Guide? |  |  |
| Has the enclave identified Class A users as described in Section 4 of the VoSIP Connection Guide? |  |  |
| Has the enclave verified all firewalls are compliant to pass VoSIP ports and protocols as outlined in the Enclave Configuration Guide? |  |  |
| Has the enclave registered the VoSIP ports and protocols with DoD Ports, Protocols and Service Management System (PPSM) in accordance with DODI 8551.1 as outlined in the Enclave Configuration Guide? |  |  |

If any of the above questions were answered “NO” your connection approval from DISA may be denied until such criteria are met. Please convert this form to .pdf format and submit completed questionnaires to DISA, Applications Division, Enterprise Network Section (SE331). The points of contacts for this action are:

|  |  |
| --- | --- |
| *Mr. Ariel Fuertes, VoSIP Action Officer*  *301-225-2704 (DSN: 375)*  [*disa.meade.ns.list.vosipecvvoip@mail.mil*](mailto:disa.meade.ns.list.vosipecvvoip@mail.mil) | *Mr. Vincent Betties, VoSIP Engineer*  *301-225-2618 (DSN: 375)* |

**II. Additional IP address and NNX request**

*\*\*\* Please fill-in all POC information in Section I and Section II only for additional IP address requests and NNX assignment changes. Submit this request form to the DISA points of contacts listed above. Organizations requesting additional NNXs only need to fill-in the POC information in Section I and the NNX and location columns “only” in Section 2.*

Please provide IP address request information in the following format on an excel spreadsheet, updated diagram of the enclaves VoSIP architecture and completed form to DISA SE331:

|  |  |  |  |
| --- | --- | --- | --- |
| Potential Growth | Number of Users | Location | NNX |
| 1-year |  |  |  |
| 3-year |  |  |  |
|  |  |  |  |

**Class A user spreadsheet format**

|  |  |  |  |
| --- | --- | --- | --- |
| MAC Address | IP address | Phone number | User Identification |
| MAC Address of IP phone | XXX.XXX.XXX.XXX | NYX-NNX-XXXX | Decided by enclave |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Block for

Designated Approving Authority