



Electronic Mail Discovery Request Form

Use this form to submit a request to State of Alaska (SOA) for Email Hold, Public Record or Legal Discovery.
(This is an interactive form and can be filled out online and printed for signatures or printed blank and manually completed.)

Page 1 of 3

Check one box

Email Hold Request **Public Record Request** **Legal Discovery Request**

Today's Date: _____

Check to confirm the original document of the public information request or legal hold is attached.

Department: _____

Division: _____

Request Title: _____

Request Description: _____

Requested Time Frame:

From Date: _____ Through Date: _____

Employee/Name Criteria

When the *Employee/Name* criteria is for more than one person and each Employee/Name has the same *Hold/Search* criteria; the search criteria only needs to be written once, however, each of the *Employee/Name* criteria must be provided in full. To provide a list for more than three individuals, please copy page two and change the employee # to the appropriate number.

Employee #1

First Name

Last Name

Current Name: _____

Prior Name: _____

Current SOA Username: _____ Prior SOA Username: _____

Current Email Address: _____ Prior Email Address: _____

Current Department: _____ Prior Department: _____

Hold or Search Criteria

Provide below any terminology or group of language to be used to identify in the hold or search.

Provide below the field names (e.g., subject field, message field and attachment) where terms or language may be located.

This form continues on the next page

Employee #2

First Name

Last Name

Current Name: _____

Prior Name: _____

Current SOA Username: _____

Prior SOA Username: _____

Current Email Address: _____

Prior Email Address: _____

Current Department: _____

Prior Department: _____

Hold or Search Criteria

Provide below any terminology or group of language to be used to identify in the hold or search.

Provide below the field names (e.g., subject field, message field and attachment) where terms or language may be located.

Employee #3

First Name

Last Name

Current Name: _____

Prior Name: _____

Current SOA Username: _____

Prior SOA Username: _____

Current Email Address: _____

Prior Email Address: _____

Current Department: _____

Prior Department: _____

Hold or Search Criteria

Provide below any terminology or group of language to be used to identify in the hold or search.

Provide below the field names (e.g., subject field, message field and attachment) where terms or language may be located.

This form continues on the next page

Systems Involved:

- Exchange (Active Mail Store, Archive, Journaling)
- SSO Forensic Machine
- SSO Forensic Applications and Tools

Is this an extension RENEWAL? NO: YES: Original Authorization Date: _____

Effective Date of Request: _____

Authorization

SOA Requesting Person

Requester (Print Name)

Requester (Signature)

Date

Chief Security Officer (CSO) or Designee

CSO (Print Name)

CSO (Signature)

Date

Approve Request:

Denied Request:

Required Information to SSO:

Department of Administration Commissioner – Chief Information Officer (CIO) or Designee

CIO (Print Name)

CIO (Signature)

Date

Approve Request:

Denied Request:

