



Trellix License Review and Certification Form

On the behalf of _____ (Company Name), I _____ (your name) certify that I have conducted the Trellix Product Deployment Review for all users within the enterprise that would benefit from the functionality of the Trellix applications, regardless of ownership.

Is this Certification for (Country Name) or (Worldwide)? _____

Please list all company names/entities that this certification includes:

Are the products being used for internal purposes only? (Y / N)

If No, please explain: _____

Please provide the quantity of each license type deployed within your organization below.

(WS=workstation / S= server)

Product	Quantity	Product	Quantity
VirusScan for Windows (WS):	_____	Host IPS (WS):	_____
VirusScan for Windows (S):	_____	Host IPS (S):	_____
VirusScan for Mac:	_____	Policy Auditor (WS):	_____
VirusScan for Linux (WS):	_____	Policy Auditor (S):	_____
VirusScan for Linux (S):	_____	SiteAdvisor Enterprise:	_____
VirusScan for Storage:	_____	Change Control (WS):	_____
Device Control:	_____	Change Control (S):	_____
Drive Encryption:	_____	Application Control (WS):	_____
Files & Removeable Media:	_____	Application Control (S):	_____
Mgmt of Native Encryption:	_____	Network Security IPS:	_____
DLP Endpoint:	_____	Security for MS SharePoint	_____
Network DLP Monitor:	_____	(Internal Node Usage	_____
Network DLP Discover:	_____	Security for MS SharePoint	_____
Network DLP Prevent:	_____	(server – external):	_____
Endpoint Security Web Control:	_____	MOVE AV for Server (OS Instance):	_____
Endpoint Security Threat Prevention:	_____	MOVE AV for Virtual Desktops	_____
Endpoint Security Firewall:	_____	(OS Instance)	_____
Threat Intelligence Exchange:	_____	Mvision Mobile:	_____
Host IPS Firewall:	_____	Mvision Endpoint:	_____
		OCR:	_____



NOTE: For "User" definitions, please access the Product Entitlement Definitions: <https://www.trellix.com/en-us/assets/docs/legal/trellix-product-entitlement-definitions.pdf>

Certification Acknowledgement

Authorized Signature: _____

Printed Name: _____

Review Date: _____