Role Request Form

User Info:								
User's Last Name:		First I	Name:		Midd	le Initial:	Su	Iffix:
*User's EDIPI * Only REQUIRED if [Signature of DPAS User] is not present.								
Select the Environment Requested.								
Agency	Site-ID		E	nvironment		F	orm Typ	be
	,	All						

- UNCLASSIFIED | FOR OFFICIAL USE ONLY -

Access Levels:						
	*Provide Level of as Access will determine where the roles are assigned					
UPDATE	REPORT	INQUIRY				
Level of Access	Level of Access	Level of Access				

Assignment: *One per field or can select ALL box					
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
UIC:	All	Maint. Activity:	All	Equip. Pool:	All

System Role Selection:							
I want to	Role Selections	I want to	Role Selections				
Additional Information:							

Signatures: *User signature only required if EDIPI not listed above					
Signature of DPAS User:	D	Date:			
Signature of Information Owner:	D	Date:			



Maintenance & Utilization

Role Request Form

Extra Assignments:					
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
UIC:	All	Maint. Activity:	All	Equip. Pool:	All
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Maintenance & Utilization

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DPAS Maintenance & Utilization Roles Request Form Instructions

All user access forms are located on the DPAS Support website at http://dpassupport.golearnportal.org/. Once on the page go to Support > Request Access > and then select Maintenance & Utilization.

To view all available Roles and associated training, click the View DPAS Roles Spreadsheet.

User Name	Required	Enter in necessary fields	
User's EDIPI	Optional	• Enter the User's EDIPI if the User's signature is not present.	
Agency	Required	Only one Agency is permitted per form.	
Site-ID	Required	• Only one Site-id is permitted per form unless the user requires access to All Site-Ids. In this case, check the ALL checkbox.	
Environment	Required	• One Environment must be selected from the drop-down menu.	
Form Type	Required	• Select the purpose of the form, to update or create a user's account.	
Level of Access	Required	 Level of Access will determine where the roles are assigned. Indicate which level of access is required for each: Update, Reports, and Inquiry. 	
UIC(s)	Required	 If Level of Access for updates is Actbl UIC or above, then check the ALL checkbox for UIC and enter valid Actbl UIC. If Level of Access for updates is equal to UIC, then then enter a valid Actbl UIC/ UIC Combination in corresponding fields. Access maybe requested for one or more valid UIC(s) per Associated Site-id/Accountable UIC Combination. If multiple UICs are requested for a specific Actbl UIC, List each on a separate line. (More space is on page 2). 	
Maintenance Activity	Required	 If Level of Access for updates is UIC or above, then check the ALL checkbox for Maint. Activity and enter valid UIC. If Level of Access for updates is equal to Maint. Activity, then enter a valid UIC / Maint. Activity Combination. Access maybe requested for one or more valid Maint. Activity(s) per Associated Site-id/UIC Combination. If multiple Maint. Activities are requested for a specific Site-Id/UIC combination, List each on a separate line. (More space is on page 2). 	
Equipment Pool	Required	 If Level of Access for updates is Maintenance Activity or above, then check the ALL checkbox for Equipment Pool and enter valid UIC/Maintenance Activity combination. If Level of Access for updates is equal to Equipment Pool, then enter a valid UIC / Maint. Activity/Equipment Pool Combination. Access maybe requested for one or more valid Equipment Pool per Associated Site-id/UIC/EP Combination. If multiple Equipment Pools are requested for a specific Site-Id/UIC/MA combination, List each on a separate line. (More space is on page 2). 	
Role Selections	Required	Select the desired roles from the drop-down menu and indicate Add or Delete.	
Additional Information	As needed	Include any Additional Information that can assist with the Account Setup or Updates.	
Signature of DPAS User & Date	Required	 Required if User's EDIPI is not present above. Include the digital signature with EDIPI # of the User who is requesting access to the DPAS System. Enter the date the form is digitally signed. 	
Signature of Information Owner & Date	Required	 Include the digital signature of the appointee responsible for approving access to the DPAS system. (i.e. Information Owner or Alternate Information Owner) Enter the date the form is digitally signed 	

