

SCHOOL DISTRICT OF OKALOOSA COUNTY
PAWS SECURITY REQUEST FORM

SCHOOL AND/OR DISTRICT ACCESS

Instructions: Please provide the following information for user requesting PAWS access. Once completed and signed, please return to Information Systems by courier, fax (689-7440) or email (ISHelpDesk@mail.okaloosa.k12.fl.us). If you have any questions please call the Help Desk at 689-7164.

Employee Information	Dept/School Name: _____	Number: _____
	Request Date: _____	Effective Date: _____
	Employee Name: _____	DOB: _____
	Current User Id: _____	Employee Id: _____
	User Phone #: _____	Dept/School Phone #: _____
	Employee's Position: _____	

New User: Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Transfer User: Yes <input type="checkbox"/>	No <input type="checkbox"/>	From: _____
School: <input type="checkbox"/>	District: <input type="checkbox"/>	
Multi-Center: <input type="checkbox"/>	Centers: _____	

Security Access	Title Access (see appendix for details):	
	<input type="checkbox"/> District Administrator	
	<input type="checkbox"/> Principal	<input type="checkbox"/> ESE Teacher (3 Digit Id: _____)
	<input type="checkbox"/> Assistant Principal	<input type="checkbox"/> Teacher (3 Digit Id: _____)
	<input type="checkbox"/> Counselor	<input type="checkbox"/> Lunchroom Manager
	<input type="checkbox"/> Staffing Specialist	<input type="checkbox"/> School Resource Officer
	<input type="checkbox"/> School Secretary	<input type="checkbox"/> STP Monitor
	<input type="checkbox"/> GRADES Attendance Manager	<input type="checkbox"/> Department Head
	<input type="checkbox"/> GRADES Manager	<input type="checkbox"/> Department Secretary
	<input type="checkbox"/> Literacy/Math/Science Coach	<input type="checkbox"/> Maintenance Word Order Input
	<input type="checkbox"/> Media Specialist	
	<input type="checkbox"/> School Nurse	
	<input type="checkbox"/> School Social Worker	
	<input type="checkbox"/> ESE User	

Additional Profiles / Additional Notes:
Principal / Department Head Authorization: _____ (Signature)

Information Systems Use	Date Received: _____	User-Id Assigned: _____
	Date Completed: _____	Default Password: _____
	Completely By: _____	Created By: _____
	Additional Approval: _____	