This form must be completed by the requesting department prior to Technology Services accessing/auditing staff email accounts and authorized by the Superintendent of Schools.

|  |  |  |  |
| --- | --- | --- | --- |
| Date: | | | |
| Requested Access to User Account (Name): | | | |
| Access to be shared with: | | | |
| Name: | Title: | | |
| Access Granted from: Start Date:       End Date:       Indefinite: | | | |
| Requested access to: | | | |
| rvschools account (i.e. Google Drive, Google Classroom)  OneDrive  Mailbox (as a delegate only)  I-Drive  Other access (indicate what access is required and why): | | | |
|  | | | |
| **Requesting Department Contact** | | | |
| Printed Name: | | Title: | Date: |
|  | | | |
| **Authorized by the Superintendent of Schools** | | | |
| Printed Name: | | Date: | |
| Signature: | | | |

Please submit completed form to: [itservices@rockyview.ab.ca](mailto:itservices@rockyview.ab.ca)

*Reference:*

* AP140 Responsible Use of Technology
* AP404 - Employee Code of Conduct
* AP182 - Protection of Privacy
* [RVS Privacy Policy](https://www.rockyview.ab.ca/privacy_policy)
* [RVS Terms of Service](https://www.rockyview.ab.ca/terms_of_service)