



## Synergy@APS Access Authorization Form

Please fax completed form to the Office of Enterprise Solutions at (703) 228-6186.

<b>Employee Name/Position:</b>		
<b>Supervisor Name/Position:</b>		
<b>Email Address:</b>		
<b>Network Login ID:</b>		
<b>Phone:</b>		
<b>Existing User:</b>	<b>Yes</b>	<b>No</b>

Profile	√	Buildings(s)
Activities		
Assistant Principal Elementary		
Assistant Principal Secondary		
Attendance Clerk		
Attendance Improvement Plan		
Central Office Staff		
Director of Counseling without Discipline		
Director of Counseling		
Economically Disadvantaged		
Elementary Counselor		
Elementary Office Staff		
Elementary Teacher		
Executive Leadership Team		
Extended Day		
Guidance Intern		
Lockers		
Nurse/Clinic Aide		
Principal Elementary		
Principal Secondary		
Registrar		
Second Chance		
Secondary Counselor		
Secondary Teacher		
SPED Teacher		
Transcripts		
<i>Profile Not Defined (Explain)</i>		

<b>Employee Signature</b>		<b>Date</b>	
<b>Supervisor/Principal Signature</b>			
<b>Assistant Superintendent Signature (if required)</b>			
Please fax form to Enterprise Solutions (703) 228-6186.			
<b>Note: Please call the Information Services Help Center at 703-228-2847 if you have any questions.</b>			

**For ES Use Only:**

<b>Date Received</b>		<b>User Notified</b>	
<b>Processed By</b>		<b>Training Notified</b>	