



Account Request Form

A Requester will use this form to request for Administrator access to the PSW IT Registry System. The Requester will be registered and enrolled as an LRA if they qualify.

1. All fields are mandatory in this form.
2. This form must be signed by the Requester's immediate manager.
3. This form must be signed by a Registration Authority from the PSW Registry Office, before getting processed by an existing LRA.
4. Submit the completed form via email to pswr_support@uhn.ca.

Requester: Provide Details to be Registered and Enrolled as an LRA	
First Name:	Last Name:
Salutation:	Permission: <input type="checkbox"/> Tier 1 <input type="checkbox"/> Tier 2 (LRA) (choose one)
Email:	

Requester's Manager

Name:	Signature:	Date:
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Registration Authority

Name:	Signature:	Date:
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PSW Registry Office Administrator use only

Requester's Michener ID number:

Administrator Name:

Administrator Signature:

Date of Account Creation: