

**BRCAN-HMIS User Access CHANGE Form (Can be used as a Guide for informing about changes.)**

This form is for ACCESS, Yes or No, not for any TYPE of access. Changes to TYPE of ACCESS need to be vetted separately.

Date of Change Request Submission: \_\_\_\_\_

Person submitting Access Change Request: \_\_\_\_\_

AGENCY of Person submitting Access Change Request: \_\_\_\_\_

EFFECTIVE DATE: CHECK IF Today  \_\_\_\_\_ | CHECK IF DATE IN PAST

**Name of BRCAN-HMIS User whose Access is changing:** \_\_\_\_\_

**Check and Complete the ONE Situation that applies :**

**1.) DISABLE ONLY :**

- Access to BRCAN-HMIS needs to be Disabled for this User. This is the only change.

Check if this User is only to be Disabled from THIS Agency:

**NOTE any additional Agency access accounts that need be Disabled which you know of:**

\_\_\_\_\_

Check here if this User needs to be Disabled from ALL current access accounts in the BRCAN-HMIS:

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**2.) DISABLE CURRENT AGENCY ACCOUNT and MOVE to NEW AGENCY:**

- Employee is **moving to different Agency, SO** access at current Agency needs to be disabled, and access account at new Agency (ies) need(s) to be created.

The Agency (ies) that new access accounts need to be **created** for (be specific):

\_\_\_\_\_

**NOTE - if the current access account(s) for this BRCAN-HMIS User will not be Disabled now, but in the future, provide the DATE intended to be Disabled, if known:** \_\_\_\_\_

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**3.) ADDITIONAL AGENCY ACCESS:**

– BRCAN-HMIS User just needs **ADDITIONAL access accounts** for these Agencies:

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