

# GEMS Agency User ID Request Form

*Access to GEMS is restricted to provider staff who require regular access to enter data and/or review reports. Users not logging in regularly may be terminated.*

<b>User Details</b>	<input type="checkbox"/> Existing User	ID: _____	<input type="checkbox"/> Disable SharePoint (Please check if user's JWB SharePoint access should be terminated)
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New User   
  Update User   
  Terminate User   
 Effective Date: \_\_\_\_\_

First Name \_\_\_\_\_ Phone 1 \_\_\_\_\_

Last Name \_\_\_\_\_ Phone 2 \_\_\_\_\_

Title \_\_\_\_\_ Email@ \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

### System Access Level (Note: Please only check one per user ID)

- Program Administrator – This user type will be able to Add, Edit and View all evaluation and fiscal data as specified by fiscal roles below, with the ability to run all reports, for all programs assigned to the user ID
- Program Fiscal Tracking – This user type will be able to Add, Edit and View ONLY fiscal data as specified by fiscal roles below, and run reports, for all programs assigned to the user ID
- Program Participant Tracking / Evaluation/ Data Entry - This user type will be able to Add, Edit, and View all participant data, AND run reports, for all programs assigned to the user ID
- Program Participant Tracking Read Only – This user type will have Read-Only access to all participant Data, AND run reports, for all programs assigned to the user ID. This access should be given to all Lead Agencies or other agency staff who need Read Only.

### Fiscal Roles (\*\*NOTE: Assign roles only to Program Administrator or Program Fiscal Tracking user types)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Budget Editor    | <input type="checkbox"/> Reimbursement Editor    | <input type="checkbox"/> Amendment Editor    |
| <input type="checkbox"/> Budget Reviewer  | <input type="checkbox"/> Reimbursement Reviewer  | <input type="checkbox"/> Amendment Reviewer  |
| <input type="checkbox"/> Budget Submitter | <input type="checkbox"/> Reimbursement Submitter | <input type="checkbox"/> Amendment Submitter |

### Programs Requested (Note: Program ID can be found in the upper right corner of the GEMS screen or can be filled in by JWB Program Consultant upon approval)

Provider/Agency	Program	Program ID

**\*Authorized By:**

Type Name	Title	Phone #

\*Physical Signature is not necessary. All Forms Must be E-Mailed by a Supervisor to the program assigned JWB Program Consultant