



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
 DIVISION OF LEARNING SERVICES - OFFICE OF DATA SYSTEM MANAGEMENT

WEB SYSTEMS USER ID REQUEST – EDUCATOR PREPARATION PROGRAMS

INSTITUTION OF HIGHER EDUCATION (IHE)	IHE CODE
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INSTRUCTIONS

Provide the IHE name and county-district code number, first and last name, date of birth, mother's maiden name, and email address for the individual being given access to Web Applications. This information is necessary to process the application and to verify the individual's identity if problems arise.

Roles: Select a 1, 2, or 3, for educator certification or in the box, place a check mark for educator preparation to indicate the level of access that is needed to be established for the individual named below; 1 = View Only, 2 = Data Entry (cannot submit), 3 = Authorized Representative (allows you to view, enter data, and submit/approve data). By placing a check mark in items that require levels of access, you will be given the only option available for that access. The district PIN code is required if granting access to Personally Identifiable Information (PII).

QUESTIONS: Contact the Office of Educator Quality at 573-751-1191 or EQData@dese.mo.gov. By providing a security PIN code, you have enabled the ability to grant access to confidential information including individual student information contained in the Missouri Department of Elementary and Secondary Education's data systems. These data are protected by state and federal laws and must be maintained in a confidential manner at all times.

CONFIDENTIALITY AGREEMENT: Employees of IHE or DESE that have access to confidential data are required to maintain the information in a confidential manner. The unauthorized access to, modification, deletion, or disclosure of information may compromise the integrity of the system, violate individual student rights of privacy, and/or constitute a criminal act and subject the employer to a loss of federal funds.

Unauthorized viewing, reproduction/copying, and/or distribution of any confidential information outside the intended and approved use are strictly prohibited. Users violating the authorized use will lose access privileges to the system. Illegal access or misuse of this information may also be punishable by fine and/or imprisonment. Acknowledge by signature, that a signed physical record is maintained documenting that the user receiving access to confidential information has acknowledged and agreed to adhere to the [Missouri Department of Elementary and Secondary Education's Data Access and Management Policy](#).

INFORMATION FOR INDIVIDUAL BEING ADDED OR CHANGED

USER'S FIRST NAME	USER'S LAST NAME	USER'S DATE OF BIRTH (MM/DD/YEAR)
USER'S MOTHER'S MAIDEN (LAST) NAME	USER'S EMAIL ADDRESS	USER'S PHONE NUMBER
USER'S SIGNATURE		USER ID

GRANTING ACCESS LEVEL (Mark a 1, 2, or 3) *Educator Certification District/University applications are limited to one Authorized Representative per institution.

___ Educator Certification University (EPP)*

GRANTING ACCESS

(Place a check mark in the appropriate box) *Educator Prep Student Level Access is limited to three Authorized Representatives per institution.

<input type="checkbox"/> Educator Prep Student Level (PIN Required)	<input type="checkbox"/> MOSIS Data Collection (PIN Required)
OR	
<input type="checkbox"/> Educator Prep Summary Level	

ASSURANCES AND CERTIFICATION

The authorized representative accepts the responsibility for the actions requested on this form and by submitting this form requests the Department of Elementary and Secondary Education to make those changes.

SIGNATURE OF AUTHORIZED REPRESENTATIVE	PIN CODE (if required)	PHONE NUMBER	DATE
PRINTED NAME OF AUTHORIZED REPRESENTATIVE		EMAIL ADDRESS	

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, religion, gender, national origin, age, or disability in its programs and activities. Inquiries related to department programs and to the location of services, activities, and facilities that are accessible by persons with disabilities may be directed to the Jefferson State Office Building, Director of Civil Rights Compliance and MOA Coordinator (Title VI/Title IX/504/ADA/ADAAA/Age Act/GINA/USDA Title VI), 5th Floor, 205 Jefferson Street, P.O. Box 480, Jefferson City, MO 65102-0480; telephone number 573-526-4757 or TTY 800-735-2966; email civilrights@dese.mo.gov.