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**SCHOOL PORTAL USER ACCESS REQUEST FORM**

Please complete, scan and email to ***maria.cox@bmllen.com.au*** ***or*** ***Dianne.debrincat@bmllen.com.au***

**REQUESTOR INFORMATION**

|  |  |
| --- | --- |
| **School** |  |
| **Requestor Name** |  |
| **Requestor Email** |  |
| **Requestor Phone Number** |  |

**ACCESS REQUEST TYPE ADD / REMOVE** (Please circle one)

**USER (TEACHER) INFORMATION**

|  |  |
| --- | --- |
| **User’s Work Email**  |  |
| **First Name** |  |
| **Last Name** |  |
| **Position Title** |  |
| **School Phone**  |  |
| **School Mobile** |  |

**❑** Include user in **Mailing List**

**❑** Include user in **Opportunity Sharing** workflow

**USER TRAINED BY (FOR ADD REQUESTS ONLY) Note: It is a requirement that all new users
receive user training from their LLEN prior to the granting of access to the SWL portal**

|  |  |
| --- | --- |
| **Trainer Name** |  |
| **LLEN** |  |
| **Date Trained** |  |

***Note****: For non –government schools, a School Participation Agreement must be in place for your school to be granted access to the SWL portal.*