

Reset**DocFinity Access Request Form**

Prod / Test	Group Name	Grant Requested Access To:	Add	Remove	Expiration Date
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Reason for Request:_____**Authorized Signature:**_____ **Printed Name:**_____ **Date:**_____

Per the *Access to Information Technology Resources and Systems Policy #6105*, a user cannot be listed above and then sign as the supervisor. If you need access, please fill out another form and obtain approval from your supervisor. (Note: Student access expires each May and must be re-requested if needed beyond that time.)

*All requests for student DocFinity access will require a secure student email account. Request that access here: <http://solomon.longwood.edu/media/information-technology-services/solomon/swarf-11-2-revision.pdf>