

Check only applicable choices	Add a New User Modify User Profile Change name on User ID	Reinstate User	Revoke User <i>P number required</i>
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Agency	District Center Enhancing Equity
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User Information (“User” is the person whose account is being affected)

Name: First, M.I., Last	RACFID P number <i>(LEAVE BLANK IF NOT ASSIGNED YET)</i>	Effective Date
Position Title	Email Address	
Work Address, City and Zip	Direct Work Phone	Fax Number

Manager Information

Name: First, M.I., Last	Position Title
Phone	Email
Signature	Today’s Date

Office Use

Default/Home Branch:

User access setup:

For enhancing Equity and District Center employees choose all that apply to applicants job function.

- | | |
|---|--|
| <ul style="list-style-type: none"> Oregon Project Independence (OPI) Case Manager Older American Act (OAA) Case Manager Processing Home Care Worker vouchers Information and Assistance Options Counseling UCR System | <ul style="list-style-type: none"> Evidence Based Health Promotion Registration Transportation Coordinator SHIBA Coordinator Program Management & Coordination Remove Pay Voucher rights Quality Assurance |
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Provide a preferred username (8 characters total, at least one number)