

***Form Valid Until 12.31.17**



ARKANSAS DEPARTMENT OF EDUCATION

State Security Access Form

Direct Certification User

Establishes the user with access to the Direct Certification application.

Visit "<http://adedata.arkansas.gov> > Educators > Security Resources > District Access Information"
to see current member(s) in this role and to
verify changes after they have been completed.

***PLEASE DO NOT TYPE ON THIS FORM**

Entity Name: _____

Entity 4-Digit LEA:

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ADD NEW

Direct Certification User

**Note: Adding this member to the role will automatically remove the current member.*

First Name: _____ Last Name: _____

Active Directory ID: _____

(account must already exist before faxing this form)

Superintendent Signature

Date

***(See Valid Date Above)**

Fax to: Bobby Downum 501.683.3108