

Security Account Form
Instructions for Completion of this Form

This form is required to create accounts in secure access applications (AS400, HRMS excluded) used by Iredell-Statesville Schools. User accounts are subject to state and ISS Board Policy. Usernames and passwords are **NOT** to be shared with anyone. Failure to comply could result in disciplinary action up to and including dismissal.

1. Please **PRINT** legibly all information except your signature.
2. Email username **WILL** be **first name _last name**. In the event of a duplicated username, you will be assigned the username first name_last name_1.
3. All items below **MUST** be completed.

*Name (First and Last) _____

Position/Grade/Subject _____

School _____

Social Security Number _____ Date of Birth _____

Password for Email -- Will be defaulted to teacher1 by the system

*Is this a name change? Yes No

If yes, please provide your **FULL** previous name. _____

Have you ever been employed in a school district in North Carolina? Yes No

If yes, please provide the name of the last district. _____

Home telephone or cell number for district centralized calling system. _____

Signature _____ Date _____

Please return completed form in hard copy to Laura Elliott at ADR Education Center.

For Office Use Only

Email <input type="checkbox"/>	True North Logic <input type="checkbox"/>	Destiny <input type="checkbox"/>	
SIS <input type="checkbox"/>	3D Reading <input type="checkbox"/>	EVAAS <input type="checkbox"/>	Teachscape <input type="checkbox"/>
SchNET <input type="checkbox"/>	Connect Ed <input type="checkbox"/>	FitnessGram <input type="checkbox"/>	