

**\*\*CONTRACTED/NON-EMPLOYEE\*\***

**CONTRACTED/NON-EMPLOYEE TECHNOLOGY USER FORM (TUF)**  
**DEPARTMENT OF INFORMATION SYSTEMS**

**1. PERSONAL INFORMATION (Please Print)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Building \_\_\_\_\_ Assignment \_\_\_\_\_  
Start Date \_\_\_\_\_ End Date \_\_\_\_\_

**2. SERVICE(S) REQUESTED (Check all that apply)**

- \_\_\_\_\_ **Copier PIN #**  
\_\_\_\_\_ **Email** (attach Acceptable Use Policy Form (**AUP Form #7542**) if not already on file with DIS)  
\_\_\_\_\_ **eSchoolPLUS** roles will be assigned based on assignment  
\_\_\_\_\_ **WEB TOOLS on PCSD Intranet** Web Tools will be assigned based on assignment  
(Call Slips, ERNIE, EMILY, DINO, SOAP, etc)  
\_\_\_\_\_ **PSSP** for Substitute Special Education Teachers and Therapists ONLY

\*\*\*\***Teacher Access Center (TAC)**\*\*\*\*

Building Office Staff assigns TAC by adding substitute teacher to the permanent teacher's staff record

**3. WHO DID THIS CONTRACTED/NON-EMPLOYEE REPLACE**

Effective Date of Change \_\_\_\_\_  
Who Did This Contracted/Non-Employee Replace \_\_\_\_\_

**4. SIGNATURE OF RESPONSIBLE SUPERVISOR/PRINCIPAL**

\_\_\_\_\_

**Please Note: ACCEPTABLE USE POLICY (AUP FORM#7542) MUST ACCOMPANY THIS FORM)**

**ROUTE TO:** Send ORIGINAL TO: DIS @ Central Office, Attn: Susan Iwaszkiw via  
email (iwaszkiws@parmacityschools.org) and/or (fax: 440-885-8383)  
**Received in DIS** \_\_\_\_\_