

## **GEM\$ User Access Form**



Emergency Request for Authorization for Vendor/Contractor to be Assigned LEA Fiscal Representative or Superintendent/Chief Role

To be used in extenuating circumstances only

**Instructions:** 

**DESE Comments:** 

- Indicate <u>new</u> user role(s) (LEA Fiscal Representative or Superintendent) for the vendor; do not include LEA Grantwriter, LEA Update, or LEA Data View role(s).
- 2. Answer all questions and obtain the required signatures.
- 3. Submit this form to DESE's Grants Management office. DESE will review and inform you whether your request has been approved.

  Do not assign either the LEA Fiscal Representative or LEA Superintendent/Chief role before receiving authorization from DESE.
- 4. If you are requesting assignment of the LEA Superintendent/Chief role to a vendor/contractor, they must be eligible and listed on the Contract Authorized Signatory Listing (CASL) filed with DESE's Grants Management office.

LEA Name:	LEA Org Code:				
Vendor's/Contractor's Name:(Person hold role in GEM\$)		Employer/Business:			
Email address to be used by the Vend	or/Contractor in GEM\$:		Vend	or Phone:	
(Check the accuracy of this email address	s carefully, it will serve as the	vendor's/contractor's user name	<b>?</b> )		
Explain the extenuating circum	stances necessitating a	vendor/contractor to fill	this role:		
What are the contractor's/vend	dor's responsibilities fo	r the LEA's grantmaking?			
How long do you anticipate th	e vendor holding this ro	ole?			
Indicate the date that your Sc approved this vendor's contra					
ote: When determining access for LEA staff all confidentiality laws, including the Famil ontractor acknowledge and agree that to uperintendent/Chief Executive and/or Famils. In no event may a vendor/contraformation.	y Educational Rights & Privacy A he vendor/contractor will ex scal Representative for a pe	Act (FERPA) and Privacy Act (PII). sercise this role in GEM\$ only in riod of time that would unreaso	In signing this form, the the absence of the per mably delay the admin	e LEA and vendor/ manent, full-time istration of the LEA's	
endor/Contractor Signature and Date  LEA User Access Administrator Signature and Date			l Date		
Superintendent/Chief Executive Signatu	ire and Date				
Authorized by DESE:	Date:		Approved	Denied	