



USER ID REQUEST FORM

MOSES Access: Supervisors must submit this ID Request Form for those employees who require access to MOSES before they attend MOSES 101 training. Request forms are NOT needed for attendees of MOSES 101 training because they will be given MOSES production accounts upon completion of the course. Please allow 5 business days for processing.

Unemployment Insurance Telephone Claim Centers (UITCC) are not required to take MOSES training.

Date: _____

Name of Employee: _____

Job Title/Function or Type of Work Requiring MOSES: _____

Phone Number: _____

Is New Employee a Veteran Service Representative: No ___ Yes ___ If Yes: DVOP ___ LVER ___

Work Location: Primary _____

Other Locations Requiring Access if Necessary: _____

Employed by (Specify Name) _____
(State or Partner)

Date and Location where MOSES 101 training is scheduled _____

Reason for advanced MOSES ID Request: _____

Requesting Supervisor: _____ **Phone Number:** _____
Signature

In all cases, supervisors must oversee employees to ensure that they use MOSES appropriately.

To be completed by the DCS MOSES Operations Security

USER ID: APPROVED ☐ DENIED ☐ USER ID ASSIGNED

SECURITY LEVEL CONDITIONS

SECURITY COORDINATOR

REASON FOR DENIAL
(If Applicable)

Email this completed 'User ID Request Form' to moses@detma.org

Notes: