



# D2L ACCESS REQUEST

Send completed forms to [d2l@sfasu.edu](mailto:d2l@sfasu.edu).

Instructions: This form is to be completed for all new employees or employees transferring to another department at SFASU and needing access to Brightspace by D2L, as well as for individuals needing access to Brightspace by D2L who are not employed by the university. The Access Request Details portion of the form must be reviewed and signed the employee's supervisor or person responsible for non-employee for whom access is being requested.

## ACCESS REQUESTOR INFORMATION

SFA employee     Non-SFA employee (guest, vendor, publisher, etc.)

Full Name: \_\_\_\_\_

Department (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Current Email: \_\_\_\_\_

The information below is required when requesting accounts for SFA employees:

CID: \_\_\_\_\_ mySFA username: \_\_\_\_\_

SFA Job Title (include levels, if applicable): \_\_\_\_\_  
(e.g. Advisor II, Administrative Assistant, Acctg Clk II)

## ACCESS REQUEST DETAILS

Access:  New     Modify

Reason for access or modification: \_\_\_\_\_

Does this access model a previous or current employee:     Yes     No

If yes, please give employee name: \_\_\_\_\_

Role requested:

Add user to the following Brightspace course(s):

- \_\_\_\_\_ Administrator
- \_\_\_\_\_ Student Support
- \_\_\_\_\_ Help Desk
- \_\_\_\_\_ Builder/Librarian
- \_\_\_\_\_ Instructor
- \_\_\_\_\_ Student
- \_\_\_\_\_ Auditor
- \_\_\_\_\_ Guest Instructor
- \_\_\_\_\_ Teaching Assistant

Prefix	Number	Section	CRN

Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Head Name (Please Print): \_\_\_\_\_