Nebraska VR Request for Temporary Access

User's Preferred Name: (First name)	(Last name)
Type of employment:	(Last Hamo)
□ OJE	
□ OJT	
□ SOS	
□ WBL	
□ Other	
Office:	
Role:	<u> </u>
Phone (if applicable):	<u> </u>
Computer to be used:	
Start Date: Estimated End Date:	
Access Requested*:	
□ Email/Calendar	
□ Teams	
□ Internet Fax	
□ Adobe Sign	
☐ Inside NDE	
☐ QE2 (Client access to their own case will be blocked)	
*CIO may take up to a week to set up the necessary accounts.	
Office Director Signature:	Date:

Office Directors/Supervisors email this completed request form to Lindy Foley for her approval. Lindy will forward to HR/IT staff when approved.