

User Access Form: Data Driven Districts Dashboard

*First Name: *Surname:

*Email: Password
 Recovery Email:
Non-department email

ID Number: Work Number:

Cell Number:

*Level: Province Region District
 Circuit Cluster School *Level Description:
e.g. District, circuit or cluster name, or school EMIS no.

*Designation:

MEC	<input type="checkbox"/>	Provincial HOD	<input type="checkbox"/>	General Provincial Mng.	<input type="checkbox"/>
Provincial Curriculum	<input type="checkbox"/>	Provincial HR	<input type="checkbox"/>	Provincial Assessments	<input type="checkbox"/>
Provincial Psychology	<input type="checkbox"/>	CES Member	<input type="checkbox"/>	EMIS Member	<input type="checkbox"/>
Regional Manager	<input type="checkbox"/>	EDMT Member	<input type="checkbox"/>	District Director	<input type="checkbox"/>
District HR	<input type="checkbox"/>	District Curriculum	<input type="checkbox"/>	District Psychology	<input type="checkbox"/>
District Assessments	<input type="checkbox"/>	DCES	<input type="checkbox"/>	SES	<input type="checkbox"/>
CIA	<input type="checkbox"/>	DISM Member	<input type="checkbox"/>	IT Technician	<input type="checkbox"/>
Circuit Manager	<input type="checkbox"/>	Cluster Leader	<input type="checkbox"/>	Principal	<input type="checkbox"/>
School Admin	<input type="checkbox"/>	SGB	<input type="checkbox"/>	SMT	<input type="checkbox"/>
DDD PMO	<input type="checkbox"/>	DDD Training	<input type="checkbox"/>	External Partner	<input type="checkbox"/>
Other	<input type="checkbox"/>	Teacher	<input type="checkbox"/>		

If you require Personal Information view please tick the box and motivate below:

Declaration : I declare that the information provided in this form is true and correct

----- Date ----- Signature of Applicant -----

For office use only

Application authorised by: Designation: Signature of authoriser