

Infoware Services

User Maintenance Form



Remove User

To: **infoware Services' System Administrator**

Fax: (07) 3268 4359

This form is to advise **infoware Services** if any staff member leaves your organisation.

This form should be completed as soon as possible after the staff member leaves and faxed to us. We will notify you once their login privileges have been removed.

(See **Additional Notes** at the end of this document)

Please provide details of existing user login ID to be removed:

Existing User Login ID

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From when is the user to stop accessing the system

Date:

Time:

Remove e-mail

Remove infoware login access

Remove i4 browser login access

Signature

Date:

Printed Name

Email Address:

We will notify you using the above e-mail address once the above user is removed as requested.

Additional Notes

This form must be signed and returned by fax or scanned and emailed. **Please copy this form for each individual user.**

Verbal or **electronic** (via email) changes to security will not be accepted as per the Terms of **infoware Services** Proposal.

For Infoware Services office use only, Action taken by:

Date/Time: