**SH Research Information Access Request**

Requests for user access accounts will be set-up and/or modified following activation of the project or relevant amendment. Once a project receives the activation letter, complete this request form and submit to SHResearch@sharedhealthmb.ca along with a copy of the PHRPC approval (if applicable).

Note: Access requests will not be processed automatically following activation.

User Name: Click or tap here to enter text.

Does this user already have a Shared Health/Digital Health Account? [ ] Yes [ ] No

If yes, what is their SH/HSC user ID number? (eg. jsmith2) Click or tap here to enter text.

User Position Title: Click or tap here to enter text.

User Department: Click or tap here to enter text.

User Work Area: Click or tap here to enter text.

User Address: Click or tap here to enter text.

User Phone Number: Click or tap here to enter text.

Manager Name: Click or tap here to enter text.

Is the user an employee or Shared Health/Health System or the University of Manitoba?

 [ ] Shared Health/Health System [ ] University of Manitoba [ ] Other: Specify

User Personal/Staff ID/SAP Number: Click or tap here to enter text.

EPR Information

*Enter details that are applicable to this data request (if applicable)*

|  |  |
| --- | --- |
| **EPR Instance** | **Access End Date** |
| Click or tap here to enter text. | Click or tap here to enter text. |

Accuro Information

*Enter details that are applicable to this data request (if applicable)*

Identify Clinic(s): Click or tap here to enter text.

Is there a user account already created that requires the same access? [ ] Yes [ ] No

If yes, what is their SH/HSC user ID number? (eg. jsmith2) Click or tap here to enter text.

Project Information

*Enter details that are applicable to this data request*

|  |  |  |
| --- | --- | --- |
| **SH Reference Number** | **Principal Investigator** | **Project Title** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |