

## **Casewatch User Request Form**

Agency:	Request Date:	
Site Address:	City:	Zip Code:
User Name:	Title:	
Telephone:	Email:	
Casewatch User Request type: New U	User Existing User, Add Service Cate	gory(ies) Reinstate User
Replacing an Existing Casewatch User? (User	Account being replaced will be deactivated.)	☐ No ☐ Yes
If Yes, Name of User Being Deactivated:		Title
Casewatch Access Request type: Administrative (Reports, Invoicing, etc.) Provider (No direct data entry) Data Entry		
Service Category(ies) Requested:		
1. Service Category:	Contract Number:	
2. Service Category:	Contract Number:	
3. Service Category:	Contract Number:	
4. Service Category:	Contract Number:	
Agency Supervisor Printed Name:	Signature:	
Agency Supervisor Telephone:	Email:	
	DHSP USE ONLY	
Determination:		
☐ Indefinite approval until deactivated for the	he following service category(ies): 1 2 2	3 🔲 4
Temporary approval until (Date)	for the following service ca	ategory(ies): 1 2 3 4
☐ Not approved for the following service cat	tegory(ies): 1 2 3 4	
Denial reason:		
Program Manager Name:	Signature:	Date
Program Manager Name:	Signature:	Date
3. Program Manager Name:	Signature:	Date
4. Program Manager Name:	Signature:	Date