Yellowfin Access Request

Email Completed form to Systems Support "HIS@ACGOV.ORG"

CONTACT INFORMATION

Date Submitted: _____

Contact Name: _____

Contact Phone #: _____

Contact Email: _____

REQUEST FOR PERMISSION TO ACCESS YELLOWFIN DASHBOARD DATA

Name of Person requesting access: _____

Email of Person requesting access: _____

1. Indicate the type of Yellowfin data request (Check only one box):

    ☐ Aggregate Data Only (Level 1)

    ☐ Client Level Data (complete item 2 below) (Level 2)

2. Request for Client Level Data (Check all boxes that apply):

    ☐ Mental Health

    ☐ Substance Use

    ☐ AC3 Eligibility

Additional Comments:

_____

_____

_____

Supervisor Name: _____
Supervisor Email: _____

YELLOWFIN ACCESS REQUEST STATUS

Date Reviewed: _____
Support Staff Name: _____
Request Status: _____
Notes: _____

_____

_____