



Edinburg Consolidated Independent School District

Edinburg CISD Skyward User Request Form



The Edinburg CISD Skyward User Request Form is required for New User Access and CHANGE requests for existing users.

- Step 1: Download and save the Skyward User Request Form to your ECISD computer.
- Step 2: User requesting access enters required information in the Skyward User Request Form and saves to PDF.
- Step 3: Print the completed form and attain the required signatures.
- Step 4: The completed Skyward User Access Request Form with signatures is scanned and e-mailed to sysadmin@ecisd.us.
- Step 5: User and administrator requesting access will be notified by e-mail once the process is complete.

Request For:

_____ (First Name) _____ (Middle Initial) _____ (Last Name)

Employee Id Number: _____ Phone Number: _____ Ext: _____

Email : _____

Job Position: _____ (Access to screens is determined by job position)

New User

Current User

Campus Transfer

Replacement of Personnel _____ (Name of Person Replaced) _____ (User ID of Person Replaced) _____ (Employee ID Number)

New User Access Requested:

Applications: (check applicable):

- | | | |
|-----------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Assistant Principal - Attendance | <input type="checkbox"/> Diagnostician | <input type="checkbox"/> Registrar - Middle School |
| <input type="checkbox"/> Assistant Principal - Master Scheduler | <input type="checkbox"/> Dean of Instruction | <input type="checkbox"/> Registrar - High School |
| <input type="checkbox"/> Assistant Principal - Discipline | <input type="checkbox"/> Migrant Clerk | <input type="checkbox"/> Secretary - Elementary |
| <input type="checkbox"/> Attendance Clerk | <input type="checkbox"/> Migrant Department | <input type="checkbox"/> Section 504 - Campus Admin |
| <input type="checkbox"/> Bilingual Education Department | <input type="checkbox"/> Nurse | <input type="checkbox"/> Special Education Department |
| <input type="checkbox"/> Counselor | <input type="checkbox"/> PEIMS Clerk - Elementary | <input type="checkbox"/> Teacher Gradebook |
| <input type="checkbox"/> Counselor - Secondary | <input type="checkbox"/> PEIMS Clerk - Secondary | <input type="checkbox"/> View only Access |
| <input type="checkbox"/> Counselor - Elementary | <input type="checkbox"/> Principal | <input type="checkbox"/> Other _____ |

Notes:

Changes to Current User Access:

Please indicate type of changes. Additions Deletions

Justification for change requested: _____

List Screen ID's: _____

Campus or Department Approval:

Date: _____

Name : _____ Signature: _____

Campus/Department: _____ Campus/ Dept. No.: _____

Technology Department Approval:

Yes No

Approval Signature: _____ Date: _____

User ID Assigned: _____

Security Note: Student and staff data may only be exported, downloaded, and printed on ECISD owned technology equipment.
 Social security numbers should not be exported or printed from Skyward.
 User passwords must be secured. Do not share passwords.