Form: RALG-IS-A2

THE UNITED REPUBLIC OF TANZANIA PRESIDENT'S OFFICE REGIONAL ADMINISTRATION AND LOCAL GOVERNMENT



USER ACCESS REQUEST FORM (EMPLOYEE)

Institution Nam	ie: Kegion.		LG	Α	Р	acility			
Requested Action	on:								
Create New Use	r □ Bloc	k Existing User	r 🗆 N	Modify Existing Us	ser 🗆 Res	set Password □			
SECTION A: Pe	ersonal Det	ails							
Check Number: Designation: Mobile Number: NIN: Signature:				Full Name:					
•		-	,	be filled by the He Appendix A attack		epartment)			
ASC		LGRCIS		MADENI MIS		MUSE		IFT MIS	
PLANREP		FFARS		SIS		SELECTION		CHF IMIS	
GOTHOMIS		GMS		10% MIS		DOMAIN		TAUSI	
				Department:					
Signature:				Date:					
I hereby approve,				ed by Accounting licant access to the			equested	action	
Comments									
Full Name:									
Designation:			••••						
Signature:			••••	Date:					
SECTION D: He I confirm that the Full Name:	e requestec	d action has bee	en perf	•					
Designation:			••••						
Signature:				Date:					