

FMS: Workplace User Request Form

Requestor's Full Name:	
Requestor's Blazer ID:	
Requestor's Phone Number:	
Requestor's Email Address:	
Requestor's Oracle Organization Number:	
Requestor's Oracle Organization Name:	
Requestor's Campus Location:	
Reason for request:	

Requested Access for:

Floorplan Viewer

Space Survey-Approver

Space Survey-Responent

Requestor's Signature:

Supervisor's Signature:

Print Supervisor's Name:

Instructions:

- Fill out all information above and email this form to Valerie Jackson at jacksonv@uab.edu
- Once you have been added as a user, a confirmation email will be sent to you.