

LAUSD EMPLOYEE FORM – ALL REQUIRED (*) FIELDS MUST BE COMPLETED IN ORDER TO PROCESS

*Name (Last)			*(First)			(Middle Initial)
*Employee #			*LAUSD E-	Mail Account		
*Position			*Primary Phone Alterna		Alternate P	hone
*School/Office (all assigned schools)						
*Location Code(s)						
For school staff roles, apply at https://oneaccess.lausd.net						
	Central Access			Required: Immediate Supervisor:		
	Title:					
				Print Name		
	Nurse (School, LVN, etc.)		Required: Immediate Supervisor:			
	Provider Type:		Print Name (This person will assign you to all your locations)			
	DIS/Related Se	DIS/Related Service Provider (APE, LAS, Psychologist, etc.)		Required: Immediate Supervisor:		
	Provider Type:			Print Name (This person will assign you to all your locations)		
REQUIRED SIGNATURES: Your application will be rejected if <u>either</u> signature below are missing						
I understand that I have access to confidential student records and I cannot discuss or share these records with unauthorized personnel.						
★Agreed:						
		(Print) User's Name	Signa	ture	Title	Date
② *Approved:						
		(Print) User's Name	Signature		Title	Date
CHANCE /DELETE EVICTING ACCOUNT						
П	HANGE/DELETE EXISTING ACCOUNT Remove Location(s):					
	Change of Location: From: To:					
	Change Title/Role: From: To:					
	No longer an Employee (<i>Inactivate User</i>)					
Approved: (Print) User's Name Signature Title						5.1.
		(Print) User's Name	Signatu	re	Title	Date

TRAINING AND SUPPORT

For Welligent training, sign up through MyPLN by logging into https://achieve.lausd.net/mypln with your Single Sign-On account.

If you need an e-mail account or forgot your e-mail password call the ITD Helpdesk at (213) 241-5200 option 2.

Questions? Call the Welligent Support Section at (213)241-5200 option 8.

Attach this form to an online ticket for Welligent Support at: https://lausd.service-now.com/esc then select "Request Software Application Technical Support".