**Epic New User Request Form**

**Complete the information below for Epic User Account/Epic Training Assignments**

**New User's Demographics**

1. UTAD Username\*

2. Last Name\*

3. First Name\*

4. Rocket Number\*

5. Work Email Address\*

6. DEA Number\*

**New User's Department Information**

6. Manager's First Name\*

7. Manager's Last Name\*

8. Manager's Rocket Number

9. Department/Location\*

10. New User's Clinical Title/Role e.g. Surgery Resident\*

11. Is the new user a manager?\*

 No Yes

12. Who can we mirror your account to? e.g. build like Jane Smith's

13. If known, which Epic Job Roles should be assigned?

14. Which Clinical Setting Will they work in? Select all that apply\*

 Inpatient/Hospital

 Outpatient/Clinic

 Emergency Room/ED

 N/A

**New User's Credentials**

15. Credential e.g. MD, DO, MA, RN, LISW, PA-C, CNP, PTA, PT, OTA

16. Provider Type e.g. Physician, Fellow, Resident, Medical Assistant, RN, LPN, Physical Therapy Assistant

17. Specialty e.g. Internal Medicine, Hospitalist, Rheumatology, Oncology, Family Medicine