

Knoxville CUSD #202 Tech Department
New User Information Form



Personal Information:

First Name: _____ Last Name: _____

Middle Initial: _____

Date of Birth: _____

Certification Status:

☐ Certified ☐ Provisional ☐ Not Certified IEIN (if certified): _____

Contact Information:

Personal Email: _____

Mobile Phone (must receive texts): _____

I agree to use my personal smartphone for two-factor authentication _____

Employment Information:

Position/Title: _____ Supervisor's Name: _____

Department: _____ Additional Notes: _____

Employment Start Date: _____

Building: _____

Account Information:

Username (first initial, last name - nellcott): _____@bluebullets.org

Temporary Password: _____

Date Email Needed: _____

_____ The Tech Department will fill in the information below and return to the District Office

Employee Id (assigned by Alma): _____

Alma User Created
(Role, Title, Phone): ☐

Public Works Created: ☐
Door Access Created: ☐

Thrillshare Created: ☐
Thrillshare Staff Directory Created: ☐