GC-HIDTA WAN Application Form
(Please Type or Print)

By signing this form, you have read and agree to the terms set forth in the GC-HIDTA Standard Operating Procedures, Article 16: Information Technology Acceptable Usage Policy. This document can be located on our Website at https://www.gchidta.org/administrative.

Position	
☐	Staff
☐	Agent
☐	Intel

Last Name: _____ First Name: _____ MI: _____

Parent Agency Name: _____

Assigned Initiative Task Force: _____

Contact Phone Number: _____

Agency E-Mail: _____

Date: _____

Signature: _____

Initiative Supervisor's Signature: _____

Send Form to:
Scan and E-Mail: parduer@gchidta.org
Or FAX: 504-962-6948

WAN Administrator Use Only

☒ *WAN Account*		*@gchidta.org*	
☐ *Quarterly Report*		☐ *Inventory*	
☐ *SAFETNet Account**		☐ *ARMMS Account*	
☐ *Insight LPR*		☐	
☐		☐	
☐		☐	

*Requires separate application for access.