



OKLAHOMA STATE DEPARTMENT OF EDUCATION GMS USER ACCOUNT FORM

COUNTY CODE DISTRICT CODE COUNTY

NAME OF SCHOOL/ORGANIZATION

FIRST NAME MIDDLE INITIAL LAST NAME

EMAIL PHONE

Type of GMS Access Requested: (Choose One)

- Book Keeper (enter and save data)
- LEA District Admin 1 (full access to enter and submit forms/claims)
- LEA Principal (a) (access to plans/enter & save data)
- LEA View Only (can see the information, but not make changes)
- Non District Admin (full access to enter and submit forms/claims)
- Non District Book Keeper (enter and save data)
- Grant Writer (create and modify competitive grant application)
- Other

Enter any notes applicable that need to be considered.

SIGNATURE OF AUTHORIZED REPRESENTATIVE

TITLE OF AUTHORIZED REPRESENTATIVE

DATE

Submit completed form to applicable department:

- Federal Programs:** Rick.Pool@sde.ok.gov
- Special Education:** Karen.Howard@sde.ok.gov
- School Support:** Zada.Sery@sde.ok.gov
- 21st Century:** Tracie.Raibourn@sde.ok.gov
- Competitive:** Shelly.Perkins@sde.ok.gov
- Student Support:** Cheryl.McGee@sde.ok.gov

