## **Canvas LMS Admin-Level Access Request Form**

For Faculty and Staff

## **SECTION 1: Requestor Information**

Full Name:				
Title/Position:		Department/Pr		
		Phone Number		
ECTION 2: Access Request Details				
,	Request: ustification for needing adm r operational goals)	nin-level access, includ	ding how it supports	
•	Level of Access: descriptions)			
•	, ,	Duration of Acc	cess:	
□ Acco □ Dea □ Chai	•	☐ Ongoing		
□ Adm	nin Assistant	☐ Temporary		
□ 1P&	ructional Designer SS Admin Advisor	Access needed u	ntil:	
tudent privacy, and re olely for the purposes nly authorized to acco	esponsible use of institutional sys stated in this request and within ess courses, users, and data for w n courses or data outside of that	tems. I agree to use my a n the scope of my instituti hich I have been granted		
equested by			on	
ECTION 3: Appr	oval			
ean's Signature:			_Date:	
ice President for	Academic Affairs		Date:	
ECTION 4: Adm	inistrative Use Only			
<ul> <li>□ Notified via email on</li> <li>□ Acknowledged</li> <li>LMS Administrator Action:</li> </ul>		Role Assigned:  • Effective Date:		

FORM UPDATED 6/5/25