



## Information Technology Access Request Form

Please Email Form to [mem-cs@allcovered.com](mailto:mem-cs@allcovered.com) or Fax to (901) 385-0044

**New**

**Modify**

**Term**

Team Member Name:

Submitted by:

Location:

Submitted date:

Department:

Start date:

Position:

Term date:

**Grant/Disable Access to:**

Davidson Network

Email

(All Covered except Hyatt)

**Hotel Accesses Granted:**

PMS	M3	HotSos	CI-TY	Other
OnQ	HIS	LogMeln	ISAC	
Dnet	Squirrel	AE	Benefit Select	Other
Opera	Aloha	Franchise	E-verify	
Galaxy	Micros	CRS	Other	Other
SMS	Delphi	RMS		

**Hotel Specific Distribution Lists:**

**Distribution Lists:**

All Controller	All Hotel Engineer	Controller Email Alias	Hotel Engineer Alias
All Director of Sales	All Hotel Manager	Director of Sales Alias	Hotel Manager Alias
All Director of Catering	All HR Director	Director of Catering Alias	HR Director Alias
All Food & Beverage Director	All Rev/Res Manager	Food & Beverage Director Alias	Rev/Res Manager Alias
All General Manager		General Manager Alias	

**Notes/Comments or Special Instructions**

**Approved by (Signature):**

Type Name:

Type Title:

Date:

Note:

- Positions below Hotel Steering Team must be approved by a Steering Team Member.
- New Steering Team Members must be approved by the General Manager or HR Director.
- New General Managers must be approved by Regional VP of Operations or Corporate Director of HR.

**SUPPORT USE ONLY**

Complete by:

Date: