**Sentinel Access Request Form**

**Part 1- Requestor and Request Information.**

**Please complete the name of the person who requires access and the details of the approver below. You will receive a response within 5 working day from Sentinel@mitie.com.**

|  |
| --- |
| **Requester and Sponsor Information** |
| Name: |       | Contact details: |       |
| Organisation  |       | Role: |       |
| Sentinel ID |       | Email |       |
| Date of Submission: | Click or tap to enter a date. |

|  |
| --- |
| **Approval Information** |
| Approver Name: |       | Contact details: |       |
| Organisation  |       | Role: |       |
| Date of Approval | Click or tap to enter a date. |

|  |  |
| --- | --- |
| New access request |[ ]  Change of access request |[ ]
| Removal of access request |[ ]  Access renewal |[ ]
| Other |[ ]   |  |
| If other, please specify |       |

**Please select from one of the below requirements that fits your request:**

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# Part 2- New, Change and Renew Access Request Details

**Please complete the below sections with further details for your request, this does not need to be completed if you are request removal of access please see part 3.**

**Select from one of the below what data you require access to:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Data Type** | **Read Only** | **Create** | **Amend** | **Remove** |
| Trainer/Assessor/Invigilator  |[ ] [ ] [ ] [ ]
| Scheme members competences |[ ] [ ] [ ] [ ]
| Medical data |[ ] [ ] [ ] [ ]
| Location data |[ ] [ ] [ ] [ ]
| Medical Providers |[ ] [ ] [ ] [ ]
| Sponsor |[ ] [ ] [ ] [ ]
| Training and assessments |[ ] [ ] [ ] [ ]
| Fatigue and swipe in  |[ ] [ ] [ ] [ ]
| Training Providers |[ ] [ ] [ ] [ ]
| Track Visitor Permit |[ ] [ ] [ ] [ ]
| Cards |[ ] [ ] [ ] [ ]
| Other |[ ]
| If other, please specify |       |

|  |  |
| --- | --- |
| Training Provider |[ ]  Trainer/Assessor  |[ ]
| Medical Provider |[ ]  Safety Role  |[ ]
| Sponsor Administrator (supply chain) |[ ]  Network Rail Sponsor Administrator (supply chain) |[ ]
| Site Access Administrator  |[ ]  Web Check |[ ]
| Location Administrator  |[ ]  Track Visitor Permits |[ ]
| Network Rail Administrator  |[ ]  NSARE |[ ]
| MITIE Administrator  |[ ]   |  |

**Please select the access role you require in Sentinel**

|  |  |
| --- | --- |
| Training Provider |[ ]  Trainer/Assessor  |[ ]
| Medical Provider |[ ]  Safety Role  |[ ]
| Sponsor Administrator (supply chain) |[ ]  Network Rail Sponsor Administrator (supply chain) |[ ]
| Site Access Administrator  |[ ]  Web Check |[ ]
| Location Administrator  |[ ]  Track Visitor Permits |[ ]
| Network Rail Administrator  |[ ]  NSARE |[ ]
| MITIE Administrator  |[ ]   |  |

**If this is a change request, please select the role they currently hold**

|  |  |
| --- | --- |
| Permanent  |[ ]  Provisional Access  |[ ]
| If provisional, please specify how long you require access? |       |

**Please select and specify how long you require access**

|  |  |
| --- | --- |
| Current username (if preferable)  |       |
| Preferred username  |       |

**Please complete the current username or if it is new request preferred username:**

|  |  |  |
| --- | --- | --- |
|  **T**ask Undertaken  | Why this requires Sentinel access | If access is not granted what is the impact to your business? |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |

**Provide a brief description of the tasks, rationale of why you need perform this and impacts in the table below.**

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# Part 3- Access Removal

**Please complete the below sections with further details for your access removal request**

|  |  |
| --- | --- |
| Current username (if preferable)  |       |
| Preferred username  |       |

**Please complete the current username**

|  |  |
| --- | --- |
| Training Provider |[ ]  Trainer/Assessor  |[ ]
| Medical Provider |[ ]  Safety Role  |[ ]
| Sponsor Administrator (supply chain) |[ ]  Network Rail Sponsor Administrator (supply chain) |[ ]
| Site Access Administrator  |[ ]  Web Check |[ ]
| Location Administrator  |[ ]  Track Visitor Permits |[ ]
| Network Rail Administrator  |[ ]  NSARE |[ ]
| MITIE Administrator  |[ ]   |  |

**Please select the role they currently hold**

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#  Version Control

|  |
| --- |
| Version Control |
| Version | Date | Author | Summary of Change  |
| 0.1 | 04/03/2021 | Laura Smith | Document creation |
| 0.2 | 08/03/2021 | Laura Smith | Document update following comments  |
| 0.3 | 11/03/2021 | Laura Smith | Document update following walkthrough |
| Document Reviewer(s) |
| Version | Reviewer | Date |
| 0.1 | Pam Hayre | 05/03/2021 |
| 0.2 |  |  |