



## ENTERPRISE TECHNOLOGY SERVICES

technology@howard.edu

### PASSWORD DISTRIBUTION WAIVER REQUEST FORM

Name and Title \_\_\_\_\_

Contact Email & Phone # \_\_\_\_\_

Designee's Name and Title \_\_\_\_\_

Designee's Email & Phone # \_\_\_\_\_

Please list the application(s) to  
which you would like to assign  
your designee access \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Request: \_\_\_\_\_

Approved \_\_\_\_\_

Denied \_\_\_\_\_

Reason for Denial \_\_\_\_\_