ENTERPRISE ACCOUNT REQUEST FORM
Transportation Information Systems

PART I *(To be completed by the User requesting access with UAM assistance.* ***NOTE****: An additional sheet specifying Name, SSN, AKO Address, Account Type, Application, UIC Access, Contact Information, and Profile can be used for bulk account registration.)*

1. Name *(Last, First, Middle)*: Grade/Rank:	*2.* Date:
3. Social Security Number:	*4.* Email Address (AKO or NMCI preferred):

5. Account Specification:

Training Information: ATRRS Course Number: Training Date:

Application Access: ☐ TC-AIMS II ☐ AALPS ☐ TIS-TO

UIC Access:

Profile(s): ☐ Company UMO ☐ Battalion UMC ☐ Brigade UMC ☐ ITO
☐ ITO Freight ☐ ITO Unit Move ☐ MCE ☐ Mode Operator
☐ Mode Manager ☐ TTP/MP Manager ☐ Enterprise Training ☐ Read-Only

6. Unit Name: Assigned UIC: Echelon:	*7.* Location (building #):
8. Phone (DSN): (Commercial):	*9.* Installation:
10. User Role(s):	*11.* GBLOC ID (ITO Users only):
12. DODAAC ID:	*13. IP Address (Individual or Range):*
14. Security Question: *What High School did you graduate from?*	*15.* UAM Name:
16. UAM Phone: (DSN): (Commercial):	*17.* UAM Email Address:

18. **STATEMENT OF ACCOUNTABILITY:** I understand my obligation to protect my password. I assume responsibility for the data and system to which I am granted access, in accordance with applicable policy and guidance. I will not exceed my authorized access, and will report changes in my need to know authorization, employment or duty status, or security status immediately to my designated User Account Manager (UAM).

Requestor's Signature: **X** _____ Date:

PART II *(To be completed by the Unit User Account Manager)*

ORGANIZATION UAM APPROVAL: I have reviewed this request and assure that the responsible individuals have correctly completed their respective parts and the nominee will use the account in an appropriate manner.

Organization UAM's Signature: **X** _____ Date:

PART III *(To be completed by TIS Personnel)*

User Id:	VAR Verification Date:	Account Created By:

Instructions

Overview: The TIS Enterprise Account Request Form (TIS EARF) is used to request access to TIS Enterprise. This form is to be completed by the individual requesting access (with the assistance of the designated UAM). The TIS EARF will serve as the catalyst for TIS account creation within the training and operational environments. In addition, the requestor must have a valid Visit Authorization Request (VAR) on file with TIS to obtain an account.

The TIS EARF consists of three (3) sections, each of which supports a principal participant in the account management process. Section one is to be completed by the requestor, with the UAMs assistance. The requestor MUST sign the Statement of Accountability. Section two must be completed by the requestor's designated UAM. The UAM MUST sign this form for TIS to create the account. Section three will be completed by TIS personnel.

Instructions for Numbered Items:

PART I: The requestor provides Items 1 through 16 (with UAM assistance), and signs and dates in Item 17, when establishing their account.

1. Name: Provide the last name, first name, and middle name or initial of the nominee or user. If there is no middle name indicate by using ***"NMN."*** *For the Grade/Rank, please state your current military grade and rank. DoD civilians must provide their current GS-level.*

2. Date: The requestor should enter the date the request or action is initiated (mm/dd/yyyy).

3. SSN: The requestor's SSN is provided in this field.

4. Email Address: Provide the requestor's email address in this field. TIS prefers that AKO or NMCI addresses be used for this requirement.

5. Account Specification: This section will allow the requestor and the UAM to define the parameters of TIS Enterprise account in both the training and operational environments. The following items are collected for this section:

Training Information: Requestor must provide specific course information (ATRRS course #, training date) for the training attended (or that will be attended).

Application Access: Requestor must specify which applications will be needed for both training and operational use.

UIC Access: The requestor (with the assistance of their designated UAM) will specify the list of required UICs.

Profiles: The requestor with UAM assistance must indicate which profiles will need to be assigned for the operational environment. Individuals that request a training account will automatically received the "Enterprise Training" profile. A list of the available profiles is available on the TIS Web Site.

6. Unit Information: Provide the unit name, assigned UIC, and echelon.

7. Location: Provide the requestor's unit address (including building number).

8. Phone: Provide the requestor's Defense Switched Network (DSN) and commercial telephone number.

9. Installation: Provide the requestor's (home station) location.

10. User Roles: Provide the requestor's current duty responsibilities and roles within their unit (e.g. Unit Movement Officer, BN UMC, etc).

11. GBLOC ID: Provide the requestor's Government Bill of Lading Code. The GBLOC code is a four alpha character code unique to each installation.

12. DODAAC: Provide the requestor's unit DODAAC.

13. IP Address: Provide the requestor's network IP address or the network IP range for the domain.

14. Security Question: Requires the requestor to answer a question that will be used to verify his/her identity for account maintenance (password resets, profile modifications, etc).

15. UAM Name: Provide the PRINTED full name of the requestor's designated UAM.

16. UAM Phone: Provide the Defense Switched Network (DSN) and commercial telephone number for the requestor's designated UAM (must be same individual listed in Item 14).

17. UAM Email Address. Provide the email address of the UAM identified in Item 14.

18. Statement of Accountability: The requestor shall sign and date the TIS EARF in Item 17. This signature indicates that the requestor understands that they are responsible and accountable for protection and appropriate use of their password and the access granted; and that they accept the obligations identified in the statement of accountability. Unauthorized or inappropriate use of the account can result in adverse action against the authorized user.

PART II: This section MUST be completed by the requestor's designated UAM. This confirms the UAM's intent to have an account created for the requestor. The TIS EARF will NOT be processed without the UAMs signature.

PART III: This section will be completed by TIS personnel.