

Fraser Health UCI User Access Request Form

1. Applicants First Name: _____
(Please print)
2. Applicants Middle Initial: _____
3. Applicants Last Name: _____
(Please print)
4. Applicants Telephone: _____
5. Organization Email: _____
(Please print)
6. Organization Name: _____
(Please print)
7. Organization Address: _____
(Please print)
- _____ (City) _____ (Province) _____ (Postal Code)
8. Organization Telephone: _____
9. Applicant's Role: _____
10. Applicant's Nursing Membership
or Affiliation name and license
number BCCNM 1112222 _____
11. Do you have **Extranet** Access Yes FH User Name _____
FH email _____
No

Please ensure that you have read, understood, and signed the Fraser Health Confidentiality Acknowledgement. If you are an employee of a Health Authority (other than Fraser Health), please ensure your access is approved by Manager level or higher, see signature line below.

Signature of Applicant: _____

Date Signed: _____

Health Authority Approval (other than Fraser Health) – Access Approval (manager):

Manager Name: _____
(Please print)

Signature: _____

Date Signed: _____

Please return completed forms to your UCI Site Administrator:

Site Administrator: Susan Roberts e mail susan.roberts@fraserhealth.ca
Site Name: Long Term Care Contracts & Services

Once the Extranet Site Administrator has received the UCI User Access Request Forms, they will forward them to their Fraser Health Information Management representative for set up. When your account set up is completed, you will receive a confirmation email from the Administrator Site with log in instructions.

User's Name:

Please e mail this information to:

Susan.roberts@fraserhealth.ca

Authentication Questions for USER:

In order for you to make changes to your account information, reset passwords or request service you must authenticate yourself to your account. FH requires the use of Authentication Questions to validate external user accounts.

Please have a minimum of two authentication questions that we can randomly ask. Use responses that will be easy to remember.

Below are some predefined questions you can use or you can make up your own.

1. What is your Mother's maiden name:	
2. What is your favorite Pet's name:	
3. What is your favorite color:	
4. What is the house number of the first house you lived in:	
5. What city were you born in:	
6. What is your favorite book:	