# REDCap Account Access Request Form

University of Alabama at Birmingham
Department of Pediatrics Research Office

*Use this form to request the creation or deactivation of a REDCap account.*

### Choose One:
- Create Account
- Deactivate Access

### Date of Request: \[ mm / dd / yy \]

### Assignment:
- **Faculty**
- **Fellow**
- **Staff**
- **Student**
- **External Collaborator**

**Students must renew every year.**

**External Collaborator:**

If External Collaborator, GO TO the External Collaborator Section below.

### Name of User:

(First) ________________ (Last) ________________

### Job Title:

(First) ________________ (Last) ________________

### Institution:
- **UAB**
- **COA**

### Department:
- **Peds**
- **Other:**

### Division:

### Office Phone: \[ ____-____-____ ____-____-____ \]

### Email:

### *If External Collaborator:*

**Name of Requester:** (UAB faculty or staff making request)

(First) ________________ (Last) ________________

**Name of External Collaborator:**

(First) ________________ (Last) ________________

**Study / Project Role:**

### Institution:

### Office Phone: \[ ____-____-____ ____-____-____ \]

### Email:

### Length of time (years) External Collaborator Requires Access: \[ ____ \] *Must be renewed every 5 years.*

(If indefinite leave blank)

### REDCap Account Approved / Established By: __________________________

### Date: __________________________

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**Notice:** If you are collecting data for the purposes of human subjects research, review and approval of the project is required by the UAB Institutional Review Board before entering any research data.