

Request to Add Authorized Users in the Statewide Voter Registration System

Policy. The Government Accountability Board – Elections Division (GAB) is charged with the security and accountability of the data in the Statewide Voter Registration System (SVRS). As such, GAB does not permit untrained users to have access to the SVRS. When a municipality needs help with voter registration data entry and GAB-provided training is not available, GAB will allow the municipal clerk to train the new staff in entry of voter registration applications, absentee ballot applications and voter participation. Once the clerk certifies that the training is completed, GAB staff will issue a username and password to those specific staff members to allow access to the municipality’s data and to only allow them to perform the trained functions in SVRS. The user access will not allow them to edit address ranges, setup elections or other election administration duties, until they complete the SVRS initial application training. GAB also requires a specific end date for all temporary data entry accounts. In addition, each user must sign a confidentiality agreement because the user will have access to confidential information.

Only computer terminals approved and authorized by GAB may be used to access the Statewide Voter Registration System. At the present time, GAB will not approve the use of any privately-owned computer to access SVRS.

GAB requires that the clerk agree to the following stipulations. The clerk agrees that he/she:

- Will provide training for those users listed below regarding the proper use of the application.
- Will provide supervision of those users listed below while they are working in SVRS.
- Will take responsibility for the quality of all data entered by those users listed below.
- Will ensure that all users sign a SVRS Confidentiality Agreement.

Full Name	Phone Number	Email Address	Start Date	End Date

Request

I request that the above person(s) be provided access to SVRS. I agree to the above stipulations. I have included the signed SVRS Confidentiality Agreement for each person.

Name of Municipality: _____ HINDI: _____

Name of County: _____

Name of Clerk: _____

Signature of Clerk: _____

Date: _____