

### GSO Website Account Modification/Deletion Form

Sponsors should complete this form to request modification or deletion of a GSO website user account. SSA sponsors should email the completed form to [UIT.eData.Mailbox@ssa.gov](mailto:UIT.eData.Mailbox@ssa.gov). Sponsors will receive email notification when the request has been processed.

Please **tab** from field to field.

REQUEST INFORMATION
<b>Date of Request:</b> <input style="width: 100%;" type="text"/>
<b>Type of Request:</b> <input style="width: 100%;" type="text"/> <i>(Note: Deletion requests for organizational shared accounts will delete the entire account where no one on that account will have access to the website.)</i>
<b>User ID to be changed:</b> <input style="width: 100%;" type="text"/>
<b>Explanation:</b> <input style="width: 100%; height: 50px;" type="text"/>

USER ACCOUNT INFORMATION
<b>User Name:</b> <input style="width: 100%;" type="text"/>
<b>Select user type:</b> <input style="width: 100%;" type="text"/>
<b>Organization Name:</b> <input style="width: 100%;" type="text"/>
<b>Organization ID or RID:</b> <input style="width: 100%;" type="text"/>
<b>Email Address:</b> <input style="width: 100%;" type="text"/>
<b>Phone (Include area code):</b> <input style="width: 100%;" type="text"/>

MODIFICATION REQUEST
<b>Select the utilities to which the user will need access:</b> (select all that apply to this user)
<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>
<b>Comments:</b> <input style="width: 100%; height: 30px;" type="text"/>

SPONSOR INFORMATION	
<b>Sponsor Name:</b> <input style="width: 80%;" type="text"/>	<b>Phone:</b> <input style="width: 20%;" type="text"/> <small>(Include area code)</small>
<b>Office:</b> <input style="width: 100%;" type="text"/>	
<b>Email:</b> <input style="width: 100%;" type="text"/>	

ACCOUNT STATUS - For Completion By UIT	
<b>Status:</b> <input style="width: 60%;" type="text"/>	<b>Completion Date:</b> <input style="width: 40%;" type="text"/>
<b>Processed by:</b> <input style="width: 70%;" type="text"/>	<b>Phone:</b> <input style="width: 30%;" type="text"/> <small>(Include area code)</small>
<b>Comments:</b> <input style="width: 100%; height: 30px;" type="text"/>	

**Paperwork Reduction Act Notice:** This information collection meets the requirements of 44 U.S.C. §3507, as amended by Section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 15 minutes

to read the instructions, gather the facts, and answer the questions. You may send comments on our time estimate above to: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. Send only comments relating to our time estimate to this address, not the completed form.