**Agency:** Click or tap here to enter text

**Account Coordinator:** Enter full name of Account Coordinator

**Email:** Enter the email address for Account Coordinator

**Phone:** Enter the phone number for Account Coordinator

I, Name of Account Coordinator, Title at Agency, claim the responsibilities of a CORE Account Coordinator for Agency as named below:

* Create, modify and delete CORE accounts for staff
* Associate and manage staff to scopes of work
* Full access to the Agency’s client-level data in CORE

I understand that I am responsible for ensuring that Agency staff have a business need and necessary permissions to access the requested client-level data prior to creating their CORE account, and prior to associating their account to specific Scopes of Work. I understand that it is the Agency’s responsibility to follow its own data access and security policies (e.g., HIPAA, FERPA).

|  |  |  |
| --- | --- | --- |
| **Signatures** | **Role** | **Date** |
|  | **Account Coordinator** |  |
| Print name of Account Coordinator |  |  |
|  | **Supervisor/Manager** |  |
| Print name of Supervisor/Manager |  |  |

**Please return the completed form to** [**core@kingcounty.gov**](mailto:core@kingcounty.gov)