



Sponsor User Account Creation/Update Form

Please print legibly. All fields required. User accounts should be created or updated with 2 business days.

Sponsor User Account Creation/Update Process:1) Complete this form 2) Data Management or IT processes request and/or provides appropriate

training 3) New Accounts : email from Rave systas as second email sent by GPRD User Manageme activation form (activation code is pre-filled) 3c) user completes assigned CBT 5) upon completion complete any required CBT (if new role assigned trial(s).	nt Desk, DM or IT user creates their n of all CBTs, user	Γ with user name and F r own personal passwo will have access to th	PIN 3b) user rd (six chara e requested	clicks link i acters of wh trial(s); 4)	n first em nich one n Current	nail and enters PIN into nust be a number) 3d) new Users : access Rave and	
■ New Account ■ Update Account ■ Account Termination/Inactivation							
Trial URL: Production Devel	opment En	al vironment	□Prod [Dev _]UAT	□TRN □Sim □QC	
Trial Name:							
User Account Information							
First Name:		Last Name:					
Requested User Name: Note: usually first initial and full last name; if already in use, a different user name will be assigned. The user name will be included in the PIN							
Email:							
Telephone:	Time Zone:	Time Zone:		La	Language:		
User Group requested: Administrator Batch Upload EDC EDC and DDE EDC and Reporter Study Designer Superuser Most users will have EDC and Reporter role or EDC only role							
EDC Role(s) requested: (based on specific function in the trial)							
Site Number(s): All Specific:							
Request access to Architect Module							
(Must be assigned Study Designer User Group)							
Training Information							
Trial specific training required : Yes No Unknown							
I understand that execution of this form constitutes my acknowledgement that I am being provided with a user name and PIN. Upon completion of the user activation process and establishment of a personal password, the user name and password constitute an electronic signature. I accept that my electronic signature is legally binding and equivalent to my written signature. I understand that I am responsible for data entered into the Medidata Solutions Clinical Research Application under my account name and password. I understand that sharing of passwords is illegal, and agree to keep my password secret. I agree to report any suspected fraudulent use of electronic systems in accordance with Abbott Laboratories procedures.							
User Name	User Signature					Date	
						(dd/MMM/yyyy)	
User's Supervisor's Confirmation/Approval (if necessary)							
Print Name & Title	Signature					(dd/MMM/yyyy)	
To Be Completed by Sponsor Trainer/Approver							
Approval	Signature				Date of Approval		
Print Name & Title	Authorized Signature					(dd/MMM/yyyy)	
Action Taken: ☐ MUSL sent to GPRD User Management Desk ☐ MUSL uploaded via Rave user upload process ☐ Account created manually in Rave ☐ Account updated manually in Rave ☐ Update request sent via email to GPRD UM Desk ☐ Account inactivated manually in Rave							