



Louisiana CAREWare Access Network (LaCAN)

Request to Add User Access

Instructions: This form is to be completed by the user's supervisor and emailed to the agency's designated LaCAN Partner for review and approval. Keep a copy of this form on file at your agency.

New Account

CAREWare access will not be granted until this document and the confidentiality policy has been signed by the user and their supervisor, and the CAREWare Privacy Training has been completed. The link to the training can be found below.

[CAREWare Privacy Training](#)

Agency Name	
Agency Address	
User's Name	
User's Phone	
User's Email Address	
User's Job Title	
User Group Requested (see page 2 for descriptions)	Data Entry User General User Management User
Additional permissions needed	
CAREWare Fields	Add to CAREWare Case Manager field list Add to CAREWare staff name list for services Add to another custom field list: Add to CAREWare Case Notes Author list
Training and Confidentiality Assurances	User will be trained on CW by a member of their agency User has signed the LaCAN confidentiality agreement/ policy User has completed a LaCAN-approved HIPAA training course

Computer Information

This section applies to the computer that you will be installing CAREWare on. Please see the LACAN CAREWare Manual for more information regarding LaCAN's Computer security policies.

What Antivirus Software is installed on your computer?	
LaCAN Approved Antivirus software:	<ul style="list-style-type: none"> • Bitdefender Antivirus Plus 2015 • Norton Security • McAfee Antivirus Plus • Trend Micro Titanium Antivirus + • Avira Antivirus Pro • Sophos • BullGuard Antivirus • eScan Anti-Virus • Panda Antivirus Pro • Avast! Pro Antivirus
Will you be using a laptop? (if you responded "No", no further information required)	Yes No
<i>If you are using a laptop please verify by signature that this laptop remains docked and does not leave the office.</i>	

Name (Print): _____ **Signature:** _____ **Date:** _____

Supervisor Name (Print): _____ **Supervisor Signature:** _____ **Date:** _____

Agency Supervisor: EMAIL THIS DOCUMENT AND THE SIGNED USER AGREEMENT TO YOUR DESIGNATED LACAN PARTNER

For LaCAN Partner Use Only

Date Received by LaCAN Partner _____ **Date Received by SHP** _____

LaCAN Partner Initials _____ **Date Account Established by SHP** _____

Approved by LaCAN Partner YES NO **User Name** _____

Allow User access to shared folder YES NO

Allow user to save CW data to Computer YES NO

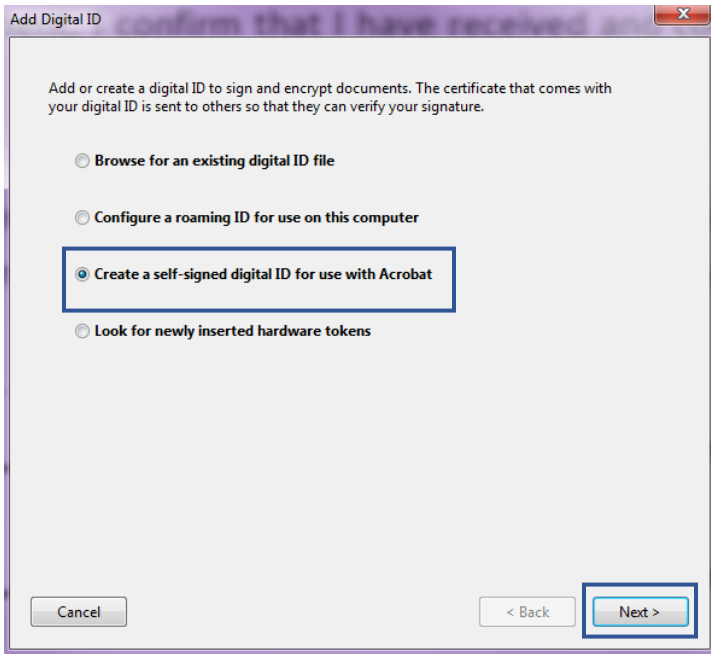
Creating a Digital Signature in Adobe

1.) Click on the “Sign Here” Tab

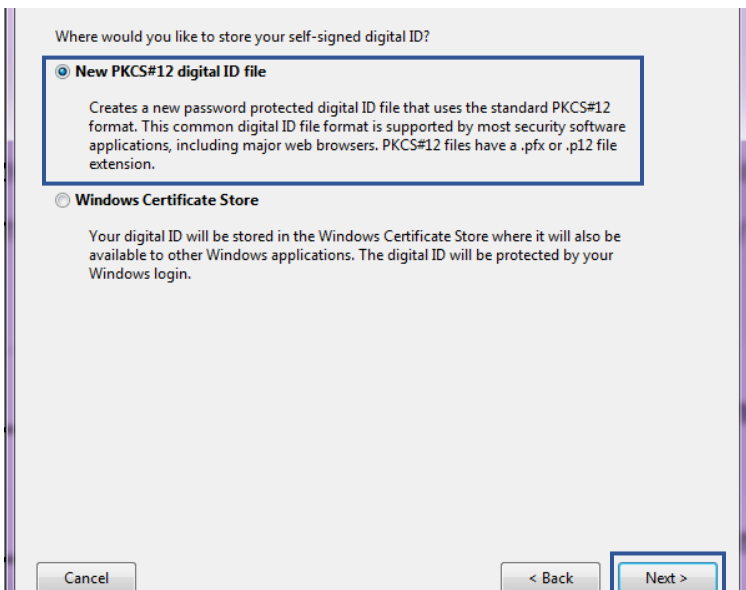
Employee Signature:



2.) Click “Create a self-signed digital ID for use with Acrobat” the click Next



3.) Click “New PKCS#12 digital ID File” then click Next



4.) Enter your name and email address and click Next

Add Digital ID confirm that I have received...

Enter your identity information to be used when generating the self-signed certificate.

Name (e.g. John Smith):

Organizational Unit:

Organization Name:

Email Address:

Country/Region:

Enable Unicode Support

Key Algorithm:

Use digital ID for:

5.) Find a location to save the signature and create a password

Add Digital ID confirm that I have received...

Enter a file location and password for your new digital ID file. You will need the password when you use the digital ID to sign or decrypt documents. You should make a note of the file location so that you can copy this file for backup or other purposes. You can later change options for this file using the Security Settings dialog.

File Name:

Password:

Confirm Password:

6.) Enter your password and click Sign

Sign Document

Digital ID: User Name <user.name@agency.com>

Digital Identification
Sign transaction, Encrypt document

User Name <user.name@agency.com>
2022/06/07 08:53:29 -05'00'
User Name

Password:

Appearance: Standard Text

User Name

Digitally signed by User Name
DN: cn=User Name, o, ou,
email=user.name@agency.
com, c=US
Date: 2017.06.07 08:53:41
-05'00'

Refresh IDs Sign Cancel