Application to Join the Kansas Elien system

This application consists of 3 pages which must be completed in full, including all required signatures on page 3, and then faxed to 1-855-492-8351

This Application is to:

☐ Add a new user ☐ Change a current user's information ☐ Delete a current user

Part 1-Business Partner's Information

Business Partner's Name _____

_____
Physical Address **City** **State** **Zip**

_____
Mailing Address (if different) **City** **State** **Zip**

Phone Number _____ **Fax Number** _____

Business Partner's main e-mail address _____

Part 2-Associate's Information (Please note forms of ID required. Information on Pg. 2)

Associate's Name _____

Associate's e-mail address _____

Select User Name _____ **Last 4 digits of SS#** _____ **Date of birth** _____

Associate's Phone # _____ **Associate's Fax #** _____

Security Questions (You must provide an answer to at least 3 of the following questions)

1. **What was your childhood nickname?** _____
2. **What is the name of your first pet?** _____
3. **What is the middle name of your oldest child?** _____
4. **In what city or town was your first job?** _____
5. **What was the color of your first car?** _____
6. **In what city or town did your mother and father meet?** _____
7. **What street did you live on in third (3rd) grade?** _____
8. **What is the name of your favorite childhood friend?** _____

Subscriber Agreement for the Kansas Elien system

This subscriber Agreement will become effective on the date you sign and date it.

As a subscriber, you agree that you will use the Kansas Elien system for which it was designed on behalf of your employer, our Business Partner.

You will be required to verify your identity. This will be done by completing the Application to Join and submitting proper ID Documentation. Proper ID documentation would be a copy of a State of Kansas issued Driver's License or ID card. If you do not have a State of Kansas issued Driver's License or ID card, another states issued Driver's License or ID submitted with another form of identification would be accepted. Examples of another form of ID would be –

- Copy of Certified Birth Certificate
- Current US Passport or Passport card
- US Military identification card
- Valid motor vehicle registration with signature
- Select Service Card with signature
- Valid health or life insurance card or policy
- Professional License
- Student identification card
- Employee identification card
- Copy of voter's registration card

Form(s) of ID must be submitted along with the application in order to sign up for the Kansas Elien system.

Once you submit your completed forms and ID(s) you will be assigned a User Name and Password for the Kansas Elien system, if you are a new user. This information must be kept confidential as this information is tied directly to your personal information. Sharing of Elien User Names and/or Passwords is prohibited.

Associate's Attestation – I, the undersigned, confirm that all information submitted in this application is true and exact to the best of my knowledge. I understand that once on the Kansas Elien system, I will be performing duties as an agent of the Business Partner.

_____	_____	_____
Printed name	**Signature**	**Date**

Supervisor's Attestation – I, the undersigned, an authorized agent of the business Partner, do hereby attest and confirm that the associate listed herein is employed by the business partner and is to be granted the status and access indicated on the Application to Join the Kansas Elien system using the information completed on this application and agreement. I also attest and confirm the individual listed on this Application and Agreement has been identified by personally appearing before me with their acceptable form(s) of ID(s).

_____	_____	_____
Printed name	**Signature**	**Date**

_____	_____
Position held with Business Partner	**Phone Number**