



# MMDT Academy Log-On Request Form

Please complete this form to establish user names and passwords for **MMDT Academy**. Complete a *MMDT Academy Deletion Form* if any users are to be deleted.

After the requested log-ons are created, you will receive an email with instructions to set up your MMDT Academy password.

## 1. Participant Information

<input type="text"/> Participant Name	<input type="text"/> Participant ID Number
<input type="text"/> Primary Representative	<input type="text"/> Primary Representative Telephone Number
<input type="text"/> Primary E-mail Address	<input type="text"/> Fax Number
<input type="text"/> Mailing Address	
<input type="text"/> City	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> State Zip Code

## 2. User Information

		Authorized Representative
		Y <input type="checkbox"/> N <input type="checkbox"/>
1.	<input type="text"/> Name of User <i>(Enter exact name - first, middle initial, last)</i>	<input type="text"/> User Title
	<input type="text"/> E-mail Address	<input type="text"/> Telephone Number
2.	<input type="text"/> Name of User <i>(Enter exact name - first, middle initial, last)</i>	<input type="text"/> User Title
	<input type="text"/> E-mail Address	<input type="text"/> Telephone Number
3.	<input type="text"/> Name of User <i>(Enter exact name - first, middle initial, last)</i>	<input type="text"/> User Title
	<input type="text"/> E-mail Address	<input type="text"/> Telephone Number
4.	<input type="text"/> Name of User <i>(Enter exact name - first, middle initial, last)</i>	<input type="text"/> User Title
	<input type="text"/> E-mail Address	<input type="text"/> Telephone Number
5.	<input type="text"/> Name of User <i>(Enter exact name - first, middle initial, last)</i>	<input type="text"/> User Title
	<input type="text"/> E-mail Address	<input type="text"/> Telephone Number

### 3. Signature

Signature of Authorized Representative

Printed Name

Title

Date

Telephone Number

### 4. Delivery Instructions

Please return this document to **MMDT Participant Services:**

**Email:** [MMDTParticipantServices@FederatedHermes.com](mailto:MMDTParticipantServices@FederatedHermes.com)

**Fax:** 1-617-235-7171