



ACT AUTHORIZATION REQUEST FORM

This form is used to request Special ACT access for CMCA, Profiled Communication, TASP, Counselor, and Staff Reports provisioning.
 Refer to the ACT AKO Information Page: <https://www.us.army.mil/suite/page/602302> for specific instructions.
 To receive authorization, submit this form in conjunction with the INCOPD Form 1-R-E.
 When complete, please submit all required forms - ACT Authorization Request Form and INCOPD Form 1-R-E (encrypted) to: craig.t.lott.ctr@mail.mil.

ACCESS REQUESTED		Check all that apply
Career Administrator (CA)		<input type="checkbox"/>
Content Manager (CM)		<input type="checkbox"/>
Total Army Sponsorship Program (TASP)		<input type="checkbox"/>
Counselor		<input type="checkbox"/>
Staff (Reports)		<input type="checkbox"/>
Profiled Communication		<input type="checkbox"/>
TYPE ACCESS REQUIRED		Check all that apply
CA Author		<input type="checkbox"/>
CA Approver		<input type="checkbox"/>
CM Author		<input type="checkbox"/>
CM Approver		<input type="checkbox"/>
TASP Program Manager		<input type="checkbox"/>
TASP ISL/RAWCC		<input type="checkbox"/>
TASP Brigade Sponsorship Coordinator		<input type="checkbox"/>
TASP Battalion Sponsorship Coordinator		<input type="checkbox"/>
Counselor (Branch Manager)		<input type="checkbox"/>
Counselor (Career Counselor)		<input type="checkbox"/>
Counselor (ACAP Counselor)		<input type="checkbox"/>
Staff		<input type="checkbox"/>
Military		<input type="checkbox"/>
Civilian		<input type="checkbox"/>
PERSONNEL INFORMATION		
Out-going Name		
Effective Date		
AKO ID		
In-coming Name		
Effective Date		
AKO ID		
Training Date		
ADDITIONAL INFORMATION		
Phone Number		
Installation/Location/Unit		
CMF/CP/BR/FA/State		
ACOM/ASCC/DRU		
Component		

Requester Enterprise Email Address: