



CHARLES R. DREW UNIVERSITY OF MEDICINE AND SCIENCE
Office of Registration and Records
1731 East 120th Street, Los Angeles, CA 90059 (323)563-4838

Power Campus Information Form

Instructions: This form must be completed for each new staff member who will need viewing access to PowerCampus. The form only needs to be filed one-time. Please return this form to the Office of Registration and Records.

PLEASE PRINT CLEARLY

Title: **Dr.** **Mr.** **Ms.**

Last Name:	First Name	M.I.	DOB
Enter ID Number from back of Employee ID card. If new hire does not yet have Employee ID Number, he/she cannot be assigned to classes as an instructor.			Employee ID Number:
Title:		Department:	

Signature

Date:

Supervisor Signature

Date:

Registrar Office Use Only

Date Entered:	PowerCampus ID:
Date Instructor Notified about MyCDU:	By: