Delete User Account

Requesting School:		
Requester's Name:		
Requester's Job Title:		
Requester's e-mail address:		
Account to be deleted		
Name:		
Reason for deletion:		
Enter the date for deletion to be effective from:		
Is there any SIMS or FMS that also requires de-activation?		
SIMS	YES	□ NO
FMS	☐ YES	□ NO
Additional information:		
DATE:		
HEAD TEACHER SIGNED:		
PLEASE PRINT NAME:		

Please return the form via email to: ict@npw.so, or alternatively fax it on the number below.