



Grants Management Credential Request For Community-Based Organizations

Complete this form to obtain access to the Grants Management System (GMS) website. This secured website hosts the GMS for ESSER application.

Organization _____ EIN _____

Contact Information for Authorized Official of the Organization:

Name _____ Position _____

Address 1 _____ Address 2 _____

City _____ County _____ Zip _____

Phone _____ Email _____

Website _____

The following signature certifies that the above individual is authorized to bind the organization to the terms of the application and any subsequent requests for expenditure reimbursements.

Signature of Authorized Official

Date

In addition to the account that will be issued for the authorized official, please list up to two additional persons in your organization that you would like to have access to the GMS for data entry only:

Name _____

Position in the Organization _____

Phone _____ Email _____

Name _____

Position in the Organization _____

Phone _____ Email _____

Please scan and email this completed form to paige.johnson@sde.ok.gov in the Family & Community Engagement office at the Oklahoma State Department of Education. OSDE will contact the authorized official with an assigned login and instructions.

FOR OFFICE USE ONLY

County District Code: _____ Username 1: _____ Password 1: _____

Credentials Approved: _____ Username 2: _____ Password 2: _____

Official Contacted: _____ Username 3: _____ Password 3: _____