

**State of Arkansas - Administrative Office of the Courts
e-Flex Access and Security Approval**

General Information	
User's Name (First, M.I., Last):	UserID: (This should be the same as the Contexte ID, in upper case)
Phone:	Location & Title:
Email:	Secret word:
Name of Clerk/Judge approving this application:	PIN Code (4 digits):
Check ONE box below, what environment this application is regarding	
<input type="checkbox"/> PRODUCTION	<input type="checkbox"/> NON-PRODUCTION

Court location access																				
List below, ALL the Court locations you will need access to																				
<table border="1"> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Role & Division access for e-Flex																																								
Role requested: Mark below, ALL the Divisions that you will need access to, in your court:																																								
<table border="1"> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td><td align="center">5</td><td align="center">6</td><td align="center">7</td><td align="center">8</td><td align="center">9</td><td align="center">10</td><td align="center">11</td><td align="center">12</td><td align="center">13</td><td align="center">14</td><td align="center">15</td><td align="center">16</td><td align="center">17</td><td></td><td></td><td></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17			
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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17																								

Case type access for e-Flex												
Mark below, ALL the subject matter divisions or specific case types that you will need access to, in your court:												
<table border="1"> <tr> <td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td> </tr> <tr> <td align="center">CIVIL</td><td align="center">CRIMINAL</td><td align="center">DOMESTIC REL</td><td align="center">JUVENILE</td><td align="center">PROBATE</td><td></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CIVIL	CRIMINAL	DOMESTIC REL	JUVENILE	PROBATE	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
CIVIL	CRIMINAL	DOMESTIC REL	JUVENILE	PROBATE								

Employee Agreement
<p>By signing this document you certify that you have a business need, documented above, to access e-Flex.</p> <p>By signing this document you also acknowledge that you are aware that any information and data obtained through access to e-Flex should be considered confidential and private and should not be shared with any unauthorized person. Any person who is found to have violated this agreement is subject to termination of employment and possible criminal prosecution.</p>
Name of applicant: <input type="text"/>
Signature: _____ Date: <input type="text"/>

Access Granted By Clerk/Judge:
Access granted from (date): <input type="text"/> Name: <input type="text"/>
Access granted to (date): <input type="text"/> Signature: _____ Date: <input type="text"/>
Submit application to ACAP Helpdesk, Fax Number 501-682-9424

Signatures for e-Flex		
Please provide your signature in each of the two below boxes for automated upload of signatures to e-Flex by AOC (currently only for Judges)		
<table border="1"> <tr> <td> </td> <td> </td> </tr> </table>	 	