

# Internet Access Request Form

Tell us the following information about yourself

Name \_\_\_\_\_ Daytime phone \_\_\_\_\_

Number and street \_\_\_\_\_ Email address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Social Security number \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Middle 4 digits of driver's license number \_\_\_\_\_ State \_\_\_\_\_  
Required

Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

## Send in your application

Mail this application to: ASSESSMENT EDUCATION UNIT MC 4-500  
ILLINOIS DEPARTMENT OF REVENUE  
PO BOX 19033  
SPRINGFIELD IL 62794-9033

Call us at: **217 785-6636**  
Fax: **217 782-9932**  
Email: **rev.proptaxed@Illinois.gov**

**Internet Access**

Assessing officials with Internet access can now view their personal education transcript information through the Internet. The program allows users access to their personal records only. The program provides for controlled access through the use of a personal identification number and other information for authenticating users. To receive directions to the site and to obtain their personal password, individuals who wish to participate in the program should complete the application form and return it to the department.