# User Support Lab Request Form

## Instructions

To request a 30-minute User Support Lab (USL) session, please fill out the requested information below and submit to Florida PALM at [FloridaPALM@myfloridacfo.com](mailto:FloridaPALM@myfloridacfo.com) at least **two business days** in advance of your first requested session. View the schedule of USL sessions on the [User Support](https://myfloridacfo.com/floridapalm/user-support) page of the Florida PALM website. Once your request has been received, reviewed, and confirmed participants will receive a meeting invitation with the details of the requested USL session. The User Support Lab is located at the Florida PALM Project, 1650 Summit Lake Drive, Suite 200, Tallahassee, Florida. Accommodations for participants outside of Tallahassee will be made in advance for those who wish to attend virtually.

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| *Support Request Details* | | | | | |
| Select the one topic in Florida PALM you need assistance with:  Completing and Submitting Forms  Managing Cash: Using Spreadsheet Journal Upload  Managing COA (DFS Staff Only)  Processing Direct Journal Deposits (entry and spreadsheet upload)  Maintaining Bank Accounts, Bank Transfers, and Bank Reconciliations  Managing Cash: Creating and Reviewing a Disinvestment or Redistribution Journal  Running Reports or Writing Queries  Managing Treasury Deals and Interest Apportionment | | | | | |
| Have you taken training on how to perform this transaction? Identify which course/program you have completed. | | | *<Insert response here>* | | |
| Do you have an open Solution Center ticket related to this request? If yes, please provide the ticket number. | | | *<Insert response here>* | | |
| Please explain what challenge you are having, including:   * A specific transaction/task where assistance is needed * Where it is located in Florida PALM (page, transaction)   Please include a screenshot if applicable. DO NOT include confidential information. | | | | | |
| *<Insert response here>* | | | | | |
| ***Form continues on second page.*** | | | | | |
| **Agency Name:** |  | | | | |
|  | **Requested Date** | | | **Requested Time Slot** | |
| **USL Session (1st Choice)** | *Click or tap to enter a date.* | | | *<Insert Time>* | |
| **USL Session (2nd Choice)** | *Click or tap to enter a date.* | | | *<Insert Time>* | |
| **USL Session (3rd Choice)** | *Click or tap to enter a date.* | | | *<Insert Time>* | |
| **Participant Type:** | **First and Last Name:** | **Email Address:** | | | **Phone Number:** |
| **Tier 0 Participant** |  |  | | |  |
| **End User Participants** (maximum of 3 may include end user and agency subject matter expert on topic) |  |  | | |  |
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