Illinois Wireless Information Network

Customer Service Center
1-800-366-8768

User Registry Information Form

Type of Request:
New User ☐
User Change ☐
User Deletion ☐

Please complete this information for each user accessing IWIN.
Each LEADS user must be LEADS Certified prior to IWIN access being authorized.

Department Name: _____

NAME Last, First, Mi	IWIN USER ID (4-8 char)	IWIN PASSWORD (4-8 char.)	STATE ID # (SID)	LEADS CERT. EXP. DATE	CAD ID (EXT. ID)

Revised 5/6/09