MICHIGAN DEPARTMENT OF LABOR & ECONOMIC OPPORTUNITY | WORKFORCE DEVELOPMENT

Michigan Adult Education Reporting System (MAERS)

User Profile Form – Step by Step Instructions

MAERS User forms are required for staff who will enter/submit data to Workforce Development at every agency. The purpose of this form is to allow the superintendent or the adult education agency official to authorize personnel within their agency to have the responsibility to access MAERS.

Section 1 – User Information

Enter the last name, first name, middle initial, title, telephone number and e-mail address of the user. Check the box to update your current MAERS ID If you have a MAERS ID which accesses a different user level or a different provider AND you no longer need that access, your current ID can be updated to access a different access level or a new provider as indicated in Sections 2 and/or 3.

Section 2 – MAERS Access Requested

Select only one. If access is needed as both a Provider and Fiscal Agent, please submit two forms.

- **Fiscal Agent Admin:** Access to all Fiscal Agent level reports, view only access for all student records for all Providers funded by the Fiscal Agency, cannot enter, edit, or delete records.
- **Provider Admin:** Access to enter, view, edit, and delete student records at the Provider level, access to all Provider-level reports.
- **View Only:** Access to view student records at the Provider level, access to all Provider-level reports.

Section 3 – Provider Information

Enter the Provider District/Recipient Code and the legal Provider Name.

Section 4 – Fiscal Agency Information

Note: Program providers may receive adult education funds from more than one fiscal agent. Each fiscal agent must be reported in this section.

1. **1st Fiscal Agent Name:** Enter the legal name of the fiscal agency.
2. **1st Fiscal Agent Code:** Enter the fiscal agency District/Recipient Code.
3. **2nd Fiscal Agent Name:** Enter the legal name of the fiscal agency (as applicable).
4. **2nd Fiscal Agent Code:** Enter the fiscal agency District/Recipient Code (as applicable).

Section 5 – Approval

This form must be signed by the superintendent of the school or the authorized agency official for the Adult Education program for other organizations.

Completed forms should be signed and returned via email to LEO-maers2.0@michigan.gov.

Questions regarding the User Profile form can be addressed by contacting the MAERS Help Desk at LEO-maers2.0@michigan.gov.

(Revised 04/2026)

Michigan Adult Education Reporting System (MAERS)
User Profile Form

Section 1 – User Information

Last Name: _____ First Name: _____ Middle Initial: _____

Title: _____ Phone: _____ Ext. _____

Email: _____

☐ Check here to update your current MAERS ID. Current ID: _____

Section 2 – MAERS Access Requested

Select one. If access is needed as both a Provider and Fiscal Agent, please submit two forms.

- ☐ **Fiscal Agent Admin:** Access to run reports for all providers funded by a specific Fiscal Agent.
- ☐ **Provider Admin:** Access to enter, view, edit, and delete student records and run reports for one provider.
- ☐ **View Only:** Access to view data and run reports for one provider.

Section 3 – Provider Information

Provider Name: _____

Provider Code: _____

Section 4 – Fiscal Agent Information

1st Fiscal Agent Name: _____ Fiscal Agent Code: _____

2nd Fiscal Agent Name: _____ Fiscal Agent Code: _____

Section 5 – Approval

Approved by:

_____ _____

Printed name of Superintendent or Adult Education official Title

Signature: _____ Date: _____

Adult Education Staff only

Reviewed and Approved by: _____ Date: _____

1st Fiscal Agent Funding Sources: _____

2nd Fiscal Agent Funding Sources: _____