



**Employee Information**

Employee ID: 123456789  
(CWID) \_\_\_\_\_

Campus E-mail: wsmith@fullerton.edu  
\_\_\_\_\_

First Name: Will \_\_\_\_\_

Last Name: Smith \_\_\_\_\_

Department Name: Information technology \_\_\_\_\_

Department ID: 12345 \_\_\_\_\_

Title: Guru \_\_\_\_\_

Campus Extension: 1234 \_\_\_\_\_

Division: IT \_\_\_\_\_

Appropriate Administrator: \_\_\_\_\_

Permanent     Temporary    If Temporary, List Appointment End Date: \_\_\_\_\_

Faculty     Staff     Management     Student     Other \_\_\_\_\_

**Account Action Request (check all that apply)**     New User     Existing User     Change Department

Types of access:     Distributed User     Central User

**Human Resources Distributed Roles**

Add	Remove	Add	Remove
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<input type="checkbox"/>	<input type="checkbox"/> Student Appointment Processing	<input type="checkbox"/>	<input type="checkbox"/> Staff/MPP Roster
<input type="checkbox"/>	<input type="checkbox"/> Receives Confirmation Tickets via Email	<input type="checkbox"/>	<input type="checkbox"/> LAPP/Staff/Faculty/Student Roster for MPP
<input type="checkbox"/>	<input type="checkbox"/> Student Time Reporting	<input type="checkbox"/>	<input type="checkbox"/> CWID Search
<input type="checkbox"/>	<input type="checkbox"/> Student Job Roster	<input type="checkbox"/>	<input type="checkbox"/> Query (run only)
<input type="checkbox"/>	<input type="checkbox"/> PTF Appointments/Contract Processing	<input type="checkbox"/>	<input type="checkbox"/> Employee Funding and Dept Position Rosters
<input type="checkbox"/>	<input type="checkbox"/> PTF Approval	<input type="checkbox"/>	<input type="checkbox"/> CD Reports for Expense, Salary Expenditures & Projections and Salary Expenditures History Page)
<input type="checkbox"/>	<input type="checkbox"/> Faculty Roster	<input type="checkbox"/>	<input type="checkbox"/> Funding Department Roster
		<input type="checkbox"/>	<input type="checkbox"/> Staff/MPP/Faculty Time Reporting.

DeptID(s) or nodes to which user is requesting access

**Human Resources Core/Central Roles**

Add	Remove
<input type="checkbox"/>	<input type="checkbox"/> Benefits
<input type="checkbox"/>	<input type="checkbox"/> Payroll
<input type="checkbox"/>	<input type="checkbox"/> CMS HR Production Support
<input type="checkbox"/>	<input type="checkbox"/> Faculty Affairs and Records
<input type="checkbox"/>	<input type="checkbox"/> Human Resources

Others:



I certify that I have read, understood and agree to follow the Access and Compliance form which I signed when I was hired.

Employee Name \_\_\_\_\_ Date \_\_\_\_\_

I certify that this access is appropriate for this individual's duties and responsibilities.

Administrator Name: \_\_\_\_\_ Date \_\_\_\_\_

	Name	Date
Initiator:	Kerry Boyer	10/26/2009
Business Analyst :	_____	_____
Trainer:	_____	_____
ISO Admin Analyst :	_____	_____
Security Admin :	_____	_____

**SAMPLE**

**Comments**

**Approval Status: Pending**

CISO Signature \_\_\_\_\_ Date \_\_\_\_\_