FMIS R*STARS ACCESS REQUEST/MODIFICATION/TERMINATION FORM

FMIS FORM #SECU24 04/2009

USER INFORMATION ADC LOGONID En		Email Address						Effective Date	
Employee Name		Employee Title					Phone		
Agency Name		Agency Code Employ			yee Termination/Transfer Date				
For Security Officers and Functional Coordin	ators Only: THIS ACCE	SS DOES NOT CARRY FO	WARD IN A COPY ID	View Glo	bal Securit	ty O Y	ES NO View	R*STARS Security	YES NO
ACCOUNTING (R*STARS) AC	CESS ACTION (che	ck one)	O ADD		С	MODIF	(INACTIVATE	
User Class	Home Batch A	Home Batch Agency:			To Modify select profile:				
MODEL ACCESS PROFILE:	Security/Finan	Security/Financial Agency:				Accounting Trans:			
Check ONE Profile OR provide a copy						Release Flag:			
O ACCTIVII 1		Agency Ranges	1.	thru					
○ ACCTLVL1 ○ ACCTLVL2		2.	thru			Batch Edit Mode:			
ACCTLVL3						Disbursement Met	:hod:		
ACTINCODE	Organization Co	Organization Code Restrictions 1.		Customized		Customized Profile	? O YES	○ NO	
O ADPICS		2.			(Attach copy of changes or write below)				
FARECV									
O INQUIRY	CICS Printer ID	CICS Printer ID (not RMT):							
L0-MODEL-COMP.DLR.DI	Work hours:		to						
PROFILE1	Work days	Work days		<u> </u>		1			
O PROFILE2	work day:	Work day:							
○ PROPMGR	Prior Month Po	Prior Month Post:				Agency Vendor Coordinator Yendor Coor. does YES NO GAD Approval/Denial & Date Nendor Coor. does not carry forward in a copy ID			
○ VIEW85	Prior Vear Post	Prior Year Post:							
○ 1099TRAN	Thor rear rost	Thorreal rost.			GAD Approvaribe	That & Date	та сору по		
	Fund Override	Fund Override:							
APPROVALS: Employee Signature						Da	ate		
Agency Designee (optional): Approved Denied* Signature							Date	Phone	
Agency FMIS Functional Coord:					Date	Phone _			
Agency FMIS Security Officer:	nied* Signature_	* Signature				Date	Phone _		
DoIT FMIS Security Officer:	Approved De	enied* Signature					Date	Phone	
FMIS Control Clerk: Date 0	Completed	Initials		son for I	Denial				

The following procedures should be used to add a new user, modify an existing security profile, or delete a security profile or profiles for R*Stars Security.

USER INFORMATION SECTION:

ADC Logon ID: Enter logon ID of the user requiring FMIS R*Stars system access. If the user logon ID has not been established, leave blank (In such cases the Agency ACF2 Security Officer must establish the logon ID and enter the newly established logon ID on the form.)

Employee Email Address: Enter the employee email address.

Effective Date: Enter the date that the request is to be effective.

Employee Name: Enter the full name of the user.

Employee Title: Enter the title of the user.

Phone: Enter users telephone number, including area code and any extension.

Agency Name: Enter the home agency name of the user.

Agency Code: Enter the Agency Profile Code associated with the user's financial Agency.

Employee Termination / Transfer Date: If the request is a result of a termination or transfer, enter the date.

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If view access to the Global Security Table is needed, check Yes, if not, check No. If view access to the R*Stars Security Table is needed, check Yes, if not, check No.

ACCOUNTING (R*STARS) SECTION:

Access Action

-Check ADD if adding a new user or adding a new User Class for an existing R*STARS user.

-Check MODIFY to replace existing access privileges for the User Class indicated with those documented on this form.

-Check INACTIVATE if inactivating access privileges for the User Class indicated.

User Class: Enter the 2-digit User Class.

Model Access Profile: If adding a new user or a new User Class for an existing R*STARS user, check one of the Model Access Profiles listed. Choose the Model Access Profile that best describes the type of access required for the user to perform job functions.

Home Batch Agency: Enter the Batch Agency representing the user's location in the Agency organization Structure or the user's Agency Code if the Batch Agency is not used.

Security / Financial Agency: Enter the users Financial Agency Code.

Agency Ranges: Enter range of Batch Agencies if the user needs to access other Batch Agencies (optional).

Organization Code Restrictions: Enter up to two specific Agency organization codes to restrict the user's access (optional).

(Agency ranges and organization code restrictions may not both be entered)

CICS Printer ID: Enter the CICS defined printer. This is required to print online reports.

Work Hours: Enter in military hours the daily time frame for the user.

Work Days: Enter the days user will be access the system.

Prior Month Post: Enter YES to give the user prior month posting capability, otherwise it should be NO.

Prior Year Post: Enter YES to give the user prior year posting capability, otherwise it should be NO.

Fund Override: Enter YES to give the user fund override capability over internal agency budgets, otherwise it should be NO.

Accounting Transactions: One digit Indicator. Refer to Appendix C

Release Flag: one digit code. Refer to Appendix C

Batch Edit Mode: one digit allowable edit mode for users. Refer to Appendix C

Disbursement Method: one digit indicator. Refer to Appendix C

Customized Profile: If the user requires special access outside of those provided by the Model Access Profile listed above or this request is to modify existing access privileges other than those listed below and shown on the form, check YES and either indicates minor changes in the space provided or attach a copy of the most appropriate Model Access Profile (see Appendix E), with annotated adjustments, to this form. All profiles for a user must be requested by a completed FMIS R*STARS Access Request/Modification/ Termination Form.

R*STARS Agency Vendor Coordinator: Check YES to give the user R*STARS Agency Vendor Coordinator privileges (add capability on screens 51 and 52). GAD approval signature must be obtained before Security Services will grant the access. Check NO to remove the R*STARS Agency Vendor Coordinator privileges for this user. Note: Vendor Coordinator access does not carry forward in a copy ID.

APPROVALS SECTION:

Employee: The user signs and dates the request form. The employee signature indicates acceptance of responsibility for the access privileges requested and subsequently granted. If the Access Action is Delete, the employee signature is not required.

Agency Designee (Optional): if an agency has assigned designees for institutions, the designee indicates whether the request is approved or denied and signs and dates the form.

Agency FMIS Functional Coordinator: The Agency FMIS Functional Coordinator indicates whether the request is approved or denied and signs and dates the form.

Agency FMIS Security Officer: The Agency Security Officer indicates whether the request is approved or denied and signs and dates the form. The Agency Security Officer sends approved requests to the Security Services, 45 Calvert Street, Annapolis, MD 21401.

DolT FMIS Security Officer: The FMIS Security Officer indicates whether the request is approved or denied and signs and dates the form

FMIS Control Clerk: The FMIS Security Control Clerk initials and dates the form when the data entry is complete.