



CUNYFirst Person of Interest (POI) HR Data Form

General Instruction:

In accordance with CUNYFirst policy, non-tax levy employees (e.g. Research Foundation) who are requesting access to CUNYFirst must **meet one of the following criteria** - *they supervise tax levy employees (e.g. college assistant), use the system to complete their job duties (e.g. student advising) or are in the system for a specific business reason (e.g. teaching a class and must be assigned to a course)*. Access will be granted only if one of the criteria is met and with authorizations from the employee's supervisor and the Department Head.

This form must be completed and returned to Human Resources before the request for access can be processed. Once the request is processed, the individual will be provided with **basic system access** – Human Resources will notify the employee to claim his/her account. For additional access or access to advanced modules (e.g. Campus Solution for student records), please contact Hostos' CUNYFirst Help Desk @ 718-664-2555 for instructions.

Annual notification will be sent to the departments requesting approval for continued access. System access must be **renewed every July 1st**. Access will automatically be extended for new users entered into the system, from January 1st to June 30th. If system access is no longer required before the expiration, the supervisor or the department must notify Human Resources and Help Desk immediately to maintain system security.

Supervisor Authorization:

(Your signature denotes your approval based on the conditions as stated above)

Signature	Date
Last, First Name (print)	Department Name
Business Email	Business Phone

Department Head Authorization:

(Your signature denotes your approval based on the conditions as stated above. Please sign again if supervisor is also the Department Head.)

Signature	Date
Last, First Name (print)	Department Name



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Employee Instruction:

Please complete the information on this page. You must provide us the Social Security Card and a valid government issued photo ID which indicates your date of birth in order for us to verify your identity and ensure proper entry of your personal information. We will not process the form if you do not supply complete and correct information. Please print legibly and return the entire form.

Name _____
Last Name
First Name
Middle Name

(We will not accept P.O. Box address)

Home Address _____
No.
Street
Apt #
City
State
Zip

Telephone Number (____) _____ (____) _____
Home
Day Time

Country of Birth _____ Ethnicity: _____
(This is an optional question, leaving it blank indicates you do not want to self-identify)

Highest Education Level: _____

Military Status: _____ *(if no status, enter 'Not a Veteran')*

Hostos business email address: _____

Place a check next to each question:

Gender: Female Male Marital Status: Single Married Other: specify _____

Are you eligible to work in U.S.: Yes No

For HR use only	
Empl_ID	Processor Initial & Date

