



# IT Services and Systems Authorization Access Request Form

## PRIVACY ACT STATEMENT

**PRINCIPAL PURPOSE:** To record names, signatures, and other identifiers for the purpose of validating the trustworthiness of individuals requesting access to Department of Correction (DOC) systems and information. NOTE: Records may be maintained in both electronic and/or paper form.

**ROUTINE USES:** Security/Access Authorization communication.

**DISCLOSURE:** Disclosure of this information is voluntary; however, failure to provide the requested information may impede, delay or prevent further processing of this request.

New/Current Staff Name:

DOC Team/Unit:  Location/Region:

### DOC Human Resources:

Initial Request    Modification    Deactivation    Contractor    Uniformed    Other

If other, please explain:

Justification for access:

Supervisor's Name:  Supervisor's Phone #:  Ex. 4054252500

Approving Authority:  Approver's Phone #:  Ex. 4054252500

### Employee Manager/Supervisor:

Please select from the following (See Instructions for Description on SharePoint portal):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Email Access                  | <input type="checkbox"/> PeopleSoft Access - Time Entry  | <input type="checkbox"/> Cell Phone           |
| <input type="checkbox"/> PeopleSoft Access Budget      | <input type="checkbox"/> PeopleSoft Access - Procurement | <input type="checkbox"/> CSI/Infoshare        |
| <input type="checkbox"/> Offender Management System    | <input type="checkbox"/> Desktop Computer                | <input type="checkbox"/> Commit               |
| <input type="checkbox"/> Laptop/Tablet Computer        | <input type="checkbox"/> Network Remote Access           | <input type="checkbox"/> Fieldware            |
| <input type="checkbox"/> Internet Access               | <input type="checkbox"/> Document Imaging Services       | <input type="checkbox"/> Aztec                |
| <input type="checkbox"/> Telephone                     | <input type="checkbox"/> Inventory Access                | <input type="checkbox"/> Education Essentials |
| <input type="checkbox"/> Radio Communication Equipment | <input type="checkbox"/> Crime Statistical Data          | <input type="checkbox"/> Offender Banking     |
| <input type="checkbox"/> Active Directory account      | <input type="checkbox"/> Other Agency Specific           |   |

If other provide details (Please print):

### IT Actions:

Access Need Verified    Accounts Created    Deactivation Completed    Asset/Inventory Updated

IT Resource Name:  Date: