

HR System Access Request Form

Security Administration, Human Resources

For additional instructions and information, log onto <http://hr.vanderbilt.edu/security/>

Operator Information

Name	
HR Employee ID	VUnet ID
Work Phone	Email Address
Job Title	Home Department Name/Number
Does the user have an e-password? <input type="radio"/> Yes <input type="radio"/> No (e-password is required for system access)	

Operator Signature

I acknowledge that the information to which I may be granted access is the property of Vanderbilt University and is to be kept confidential. I agree that I will not transfer the use of my Operator ID or password to another person and acknowledge that any violation of security or transfer of my Operator ID or password may result in disciplinary action that might include termination.

Operator Signature: _____

Date: _____

Supervisor Signature

I understand it is my responsibility to review with the operator the PeopleSoft panels to which he/she will have access, the confidential nature of information contained in these panels; and the consequences of violating confidentiality and/or transferring an operator ID and password to another person.

Print: _____

Signature: _____

Date: _____

Access Information

Effective Date of Access			
Action Requested (check only one):			
<input type="radio"/> New Access <input type="radio"/> Revise Access <input type="radio"/> Delete Access			
Database Access Requested:			
<input type="checkbox"/> HRPROD <input type="checkbox"/> PIPROD <input type="checkbox"/> Employment Verification			
Comments:			
Department Security Requested Please list the Home Department number(s) or the DPVU the operator should have access to view. For a list of Home Departments or current DPVU's, go to http://hr.vanderbilt.edu/security/			
Security Role Requested Please list the Security Role(s) the operator should have. For a description of available roles, go to http://hr.vanderbilt.edu/security/			

Items Below For Completion by Security Administrator(s) Only

Approval by HR Application Trustee

Signature: _____	Date: _____
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Completed by HR Security Administrator

Completed By		
Date Completed	Date Notified	Date Received in HR
Added To		
<input type="radio"/> Listserv <input type="radio"/> Security Database		