



OSF FORM 303HD
(Revised 02/12)

STATE OF OKLAHOMA
System Access Authorization Request (Help Desk)

Requesting Agency Name/Number _____

Division: _____

Date: _____

This request is for:

Initial Set Up Additional Access Deletion of Access De-Activate Re-Activate

If this is to De-Activate, effective date of De-Activation: _____

Does this individual have access to any other CORE/PeopleSoft system? Yes No

If yes, what is their UserID _____

User Name: _____

Phone: _____

Job Title: _____

Employee ID#: _____

Email address: _____

I hereby authorize the above named individual access to the CORE/PeopleSoft System with the security levels indicated until we send written notification that their access should be terminated. I certify that the user has received the training necessary to successfully perform all functions granted them.

Requested by: _____

Phone: _____

Signature of Agency Security Representative

Name & Title (Please print): _____

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

CRM

Add/Update

Update Only

Solutions

Worker Search

Run Queries

Provider Group: _____

(See List on Page 3 for selections)

CRM Access Approval: _____

(Help Desk Manager)



Security Agreement

The undersigned agrees to abide by the following:

1. Data originated or stored on State computer equipment is State property. Users will access only data which are required for their job. Users will not make or permit unauthorized use of any CORE/PeopleSoft data. They will not seek personal or financial benefit or allow other to benefit personally or financially by knowledge of any data which has come to them by virtue of their work assignment.
2. Users will enter, change, and delete data only as authorized within their job responsibilities. They will not knowingly include or cause to be included in any record or report a false, inaccurate, or misleading entry, nor will they knowingly alter or expunge from any record or report, or cause to be altered or expunged, a true and proper entry.
3. Users will not release CORE/PeopleSoft data except as required in the performance of their job or as directed in writing by their Appointing Authority.
4. Users are responsible for protecting their access authorization and must take steps to prevent others from using their User ID. Users will construct good passwords and manage them securely, keeping their passwords secret and not sharing them with others. If a user has reason to believe that others have learned his/her password, the user will change the password and notify the Help Desk of the situation. Users will not attempt to use the logons and passwords of others.
5. If a user finds that they have access to data they believe they are not authorized to view, they will exit from that data and report the problem to OSF Security.
6. I am aware of the responsibilities associated with access to the CORE/PeopleSoft System and agree to abide by the OSF Information Security Policies and Procedures. I understand that according to Section 840-2.11 of Title 74 of the Oklahoma Statutes the home addresses, home telephone numbers, social security numbers, and information related to personal electronic communication devices of current and former state employees shall not be open to public inspection or disclosure without written permission from the current or former state employees or without an order from a court of competent jurisdiction.

Signature of User: _____ Date: _____

Processed By: _____
Date: _____
User Notified: _____
Agency Security Representative Notified: _____

Entered in CRM by: _____
Date: _____



Instructions for completing System Access Authorization Request (OSF FORM 303HD)

Mark whether the request is to establish, de-activate or change a UserID or type of access.

User Name, phone number, job title, employee ID# and email address: This is the person for which the UserID or access is to be established. **(NOTE: The employee ID# is the number assigned to the employee on the CORE/PeopleSoft System. It is NOT their SSN#. This field may be left blank at this time.)**

Requested by: The Designated Agency Security Representative must make the request. A State Agency Security Representative Designation Form (OSF FORM 300) must be on file with the CORE Security Administrator.

DESCRIPTIONS

CRM – Has access to CRM Database to record problem solving when assigned a CRM case. User can be assigned capability to Add/Update Help Desk Cases or Update Only.

Provider Groups:

OSF

Accounts Payable	OK.Gov (NIC)
Accounts Receivable	Oracle Business Intelligence
Application Development – Environment	Open Books
Application Development – Financials	Operations
Application Development – HCM	PC/Server
Application Development – IBM	Project Management Office
Application Development – ORA	Projects
Application Development – OBN	PeopleSoft Training
Application Development – TRE	Purchasing
Application Development	Quality Assurance
ARRA Agency Data Only	SDE – Accreditation
Asset Management	SDE – Data Reports
Billing	SDE – Administration
Budget Division (Capitol)	SDE – Child Nutrition
Cabling Infrastructure (Inside Plant)	SDE – Credentialing
Cabling Infrastructure (Outside Plant)	SDE – Federal Tracking
Change Management	SDE – Financials, HR
Contracts	SDE – OCAS
Customer Service	SDE – Personnel
Data Communications	SDE – School Reporting
Data.OK.Gov	SDE – Special Education
Enterprise Learning Management (ELM)	SDE – State Aide
EPM Budget	SDE – Titles
Facilities (3115 N. Lincoln)	SDE - WAVE
General Ledger	Security (PeopleSoft)
Grants	Security (OSF Information Security)
Help Desk (OSF)	State Pay/State Per
HCM Benefits	Systems
HCM Higher Ed	Transparency
HCM HR	TREAS
HR-OPM	Treasurer
HCM Payroll	Vendors
HCM Time & Labor	Voice
Imaging	Web Portal
IT/Telecom Purchasing	
OAB Support/Business Analyst	



ODMHSAS
APPS
AVATAR
Contract
DBA
Fee-4-Service
Help Desk DMH
ICIS
Networks

OATR
SM Networks
Application Support
TeleMedicine
Telephone
TCBH Networks
Voucher Management System (VMS)

TRS
CAS
Imaging
Web

DCS
Contracting Assistants
Contracting Officers
Data Analysis
Help Desk (DCS)
Item Maintenance
Managers

P-Card
State Use
Strategic Management
Training
Vendor Registration

Send completed form to: CORE Oklahoma Office
3115 N. Lincoln Blvd.
Oklahoma City, OK 73105
Attn: Security

If you have any questions concerning this form, please contact Linda Belinski at 522-1775 or Linda.Belinski@osf.ok.gov.