

Instructions for Completing the CLPCCD Technology Systems Access Request Form for All Hires



To better process and track requests for technology access - Please fully complete and sign the associated form.

Action:

- 1-a) Select the purpose for the request is this to: add a new employee to a system(s); check for access and reinstate a returning employee; modify system access for an existing employee; or remove access.
- 1-b) Enter Effective Date when employee can begin or terminate employment (according to the PAF).

Employee Information:

- 2-a) Enter the employee's first, middle and last name. (The middle name or initial is important if there are other people in the system with the same last name and first initial)
- 2-b) Enter the employee's W-ID # assigned by Human Resources.
- 2-c) Enter the employee's job title, as hired. (Helpful for determining appropriate configuration)
- 2-d) Enter the employee's campus phone #. (If TBD, leave field blank and make a selection in the Phone section)
- 2-e) Enter the room number of the employee's office/ workstation, if applicable
- 2-f) Enter the employee's department or discipline. (This is important when configuring groups)
- 2-g) Select site/ campus.
- 2-h) Select if this is a request for name change, include previous last name.
- 2-i) Regular hires: Enter Board approval date (only for new or rehires) and select the classification of the employee. (This is important when configuring groups)
 - <u>Temporary hires not permanent employees of the District</u>: Enter the position end date which will suspend the account (according to the PAF or Student Assistant Employment Requisition). If the position is rehired or extended, another request will need to be submitted to reinstate access. Enter Board or HR approval date and select the classification. Additionally, for an outside contractor, enter the name of the organization they represent.

Computer/Network Access:

- 3-a) Select domain user account if the employee will be using computer/ networked resources or e-mail.
- 3-b) Select access to departmental shared folder(s), if applicable; include name of folder.

Email:

- 4-a) Select regular for a standard account.
 - Select alias account to forward all e-mail to an outside/ personal account. Enter outside/ personal email address for forwarding.

Phone/Voice Messaging:

- 5-a) Select user desktop phone for employees being assigned an office or workstation.
- 5-b) Select voice message account (to be associated with the desktop phone OR a phantom/ guest account)

Copy Services:

- 6-a) Select convenience copiers to copy, print, scan or fax.
- 6-b) LPC ONLY: Select campus copy center for use of Ricoh TRAC job submission site.

College Software:

7-a) Select all that apply: SARS – Grid; SARS – Trak; Other and enter the name of the software.

Banner Third Party Programs:

8-a) Select all that apply: BDMS; BossCars; DegreeWorks; Other and enter the name of the program.

Banner Access:

9-a) Select all that apply: Student Module, Finance Module, Financial Aid Module.

Comments

10-a) Enter any comments or special instruction which will be helpful in setting up the requested accounts.

Approval:

- 11-a) Employee Review the <u>CLPCCD Computer Use Board Policy 3720</u>
- 11-b) Employee print out request form, sign and date, then forward to your administrator.
- 11-c) Responsible Administrator sign, date and enter phone extension. Submit the completed form to the CLPCCD ITS Help Desk. (Requests will be processed based on start date, hire date and date received.)

If there are any questions regarding the request, the technology staff will contact the requesting department. If the request is urgent, please contact the responsible technology staff member for alternate instructions.



CLPCCD Technology Systems Access Request
Submit completed and signed requests to:
ITS Help Desk * Bldg. 1900 @ LPC * 925-424-1715



PLEASE TYPE or PRINT LEGIBLY and FILL OUT COMPLETELY

Action: □ New □ Rehire	☐ Modify Access ☐ F	Revoke Access	Effective Date:		
Employee Information:			W-ID #:		
First Name:	M.I./Name:		Last Name:		
Job Title (as hired):					
Campus Office Phone #:	Campus Office / Room #:				
Department / Discipline:					
Site: ☐ Chabot ☐ Las Positas ☐ District Services					
Request for Name Change? Previous last name:					
Regular Hire: Temporary Hire:					
Board Approval Date: Board/ HR Approval Date:					
Administrator FT Faculty / Counselor / Librarian End Date:					
Regular FT/PT Classified			/ On-call Classified	☐ Student Assistant	
	Confidential / Supervisory Classified Professional Specialist		☐ Volunteer		
		☐ Contra	ictor:		
Computer / Network:	IT Staff only:	E-mail Accoun	t:	IT Staff only:	
☐ Domain User Account	(date completed/ initials)	Regular		(date completed/ initials)	
☐ Dept. Shared Folder		☐ Alias Account:(enter personal			
access (name of folder):		address for e-mail forwarding)			
Phone / Voice Messaging:	IT Staff only: (date completed/ initials)	Copy Services:		IT Staff only:	
User Desktop Phone	(date completed/ initials)	Convenience Copier(s) (date completed/ initials)			
☐ Voice Message Account		☐ Campus Copy Center – (LPC web			
Callege Software	IT Staff only:	submission account) Banner Third Party Programs: IT Staff only:			
College Software: ☐ SARS – Grid	(date completed/ initials)		Other (list	(date completed/ initials)	
SARS - Grid	(date completed initials)	☐ BossCars	•	(date completed, initiale)	
		_	below):		
Other (list below):		☐ DegreeWork	S		
Banner Access:	ITS Staff Only:	Notes:			
(for administrative use)	(date completed/initials)				
Student Module					
☐ Finance Module:					
Fund# Org#	, , _ ,				
☐ Financial Aid Module					
☐ HR Module (HR only)					
☐ IBM Account					
Comments / Special / Additional Instructions:					
Approvals I among the children the Object I as Decites Community Callege District Community and Naturals IT Staff only					
Approval: I agree to abide by the Chabot-Las Positas Community College District, Computer and Network Use Board Policy 3720 which can be found online at: http://www.clpccd.org/board/bprevisedchapter3.php (date of e-mail					
confirmation/init)					
Employee Signature: Date: Date: I authorize establishment of requested accounts and agree to notify all parties on conclusion of employment.					
i authorize establishment of requ	i authorize establishment of requested accounts and agree to notify all parties on conclusion of employment.				
Administrator / Manager Signature		Da	te Phone	e Ext.	