

City of Birmingham

RACF CICS Security	Computer Access	Network Access
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Department: _____ Division: _____ Dept #: _____

Employee Name: _____

First
MI
Last

Phone Number: _____ New Access: _____ Change Access for Userid: _____

RACF:

Below enter the Application(s) for which you require access and the type of access (**UPDATE** or **READ ONLY**): Examples: Microsoft Office, Lawson, Mainframe, etc. If this request is for a new employee, list if they need a computer. All Surface Pros have to be requested with Mayor's Office Approval. Please indicate the need for a portable device. If you are unsure of the access and type, call Darryl Burroughs in the Information Management Services at Ext. 2803, Fax Ext.2010. For Smart phones and iPads (*subject to administrative approval*) and are issued through Communications Division, Nelvin Short.

**Terminal ID: _____ Application(s): _____
*(for mainframe: list applications for example: PPMS, ULTR, etc.) ** ID's are Department/Division specific (ex: Revenue=RV00)*

Network:

Enter Applications and file access needed, specifying the type of access needed for each. If access needed is the same as another user, please indicate the userid this account should match.

Application(s) and files:

_____ Write Change Delete _____ Write Change Delete
 _____ Write Change Delete _____ Write Change Delete

Who in your department should this user mirror name and user id? _____ Is the employee a Transfer? Yes No
 Need a computer for position? Yes _____ No _____ City issued desk phone# (if known): _____

<u>Application</u>	<u>Employee Role</u>	<u>Training Needed</u>
Lawson	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Stromberg/ Kronos	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
ImageNow	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
*New World Systems	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Office 365	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

*(*New World has additional approval forms for type of access rights)*

Equipment

Only check items needed or items already approved by leadership (example all mobile devices require prior approval from leadership ex. iPads, phones, MiFi, etc.)

Requested Type: _____

Primary or Loan: _____
 If Loan Duration: _____

Items Requested (<i>Check</i>)	Quantity	Items Requested (<i>Check</i>)	Quantity
Desktop Computer		Mobile Phone	
Surface Pro		MiFi	
Black/White Printer		iPad	
Color Printer		Voicemail	
Laptop		Other:	

Departmental I. M. S. Liaison Signature _____ Date _____ Department/Agency Head Signature _____ Date _____