PeopleSoft Production Security Request Form

DIRECTIONS: Please complete this form to add, update or lock user security access for the PeopleSoft (PS) systems. Both the person who prepared the form and the PS Security Administrator who can validate the user's need for the access requested must sign the completed form. Upon completion, please attach this form to a Remedy ticket or contact the Help Desk (cohelpdesk@ccc.edu), extension 312-553-2600, for assistance.

Responsible Computer Usage Policy

City Colleges of Chicago (CCC) strictly prohibits unauthorized distribution, reproduction, modification or deletion of any applicant, employee or student information outside the intended and approved use. The PS systems are for the use of authorized users only and may not be given to temporary staff or students, unless expressly set up and controlled for that purpose. Anyone using these systems expressly consents to all monitoring conducted by CCC or its vendors. It is the responsibility of all PS system users to read the Responsible Computer Usage Policy. Prohibited access or misuse of this account is considered a violation of the Responsible Computer Usage Policy. Users who are found to have violated the Policy will be subject to disciplinary action, up to and including (but not limited to) warnings, probation, suspension, discharge, dismissal, expulsion, and/or legal action.

EMPLOYEE/CONSULTANT RELEASE:

As a **CCC Employee/Consultant**, by signing this form, I certify that I have read and understand the Responsible Computer Usage Policy. I understand that my CCC ID and password are to be kept confidential. Should I share this information, my access will be revoked.

Employee/Consultant Signature:

Signature: _____ Printed Name: _____ Date:_____

MANAGER APPROVAL:

As a **CCC Manager**, by signing this form, I authorize this employee/consultant for the access requested on the following pages, including access to confidential student and/or employee data.

Manager Signature:

Signature: _____ Printed Name: _____ Date:_____

NEW/EXISTING USER AFFECTED:

First Name: _____ Last Name: _____ MI:

Email Address: _____ Phone Number: _____ Job Title: _____

Network/User ID: _____ Employee ID: _____ Dept:_____

Effective as of (mm/dd/yyyy): _____ User is: ☐ Employee ☐ Consultant/POI ☐ Work Study Student

Please check only one home college: ☐ District Office ☐ DA ☐ HW ☐ KK ☐ MX ☐ OH ☐ TR ☐ WR

* If multiple users require the same access, please include the user list in your Remedy/Help Desk ticket (Excel or Word).

SYSTEM ACCESS: (Please check all that apply)

☐ A. HCM/HR (Human Capital Management) - Please complete **Section A**.

☐ B. IH/Portal (Interaction Hub) - Please complete **Section B**.

☒ C. FSCM/FIN (Financials) - Please complete **Section C**.

☐ D. CS (Campus Solutions) - Please complete **Section D**.

SECURITY ADMINISTRATOR APPROVALS: (Please sign for your respective pillar)

HCM/HR Approval:

Signature: _____ Printed Name: _____ Date:_____

IH/Portal Approval:

Signature: _____ Printed Name: _____ Date:_____

FSCM/FIN Approval*:

Signature: _____ Printed Name: _____ Date:_____

***** Signature: _____ Printed Name: _____ Date:_____

* For Purchase Order & Requisition approvals, the signature of the ***Deputy Procurement Officer*** is also required.

CS Approval:

Signature: _____ Printed Name: _____ Date:_____

PROXY APPROVAL (VC and President Level ONLY)

☐ **Proxy Approval Access (FSCM ONLY) -** this grants the new user the same procurement approval authority as the user listed below. **The new user is authorized to be a proxy for:**

Network/User ID: Employee ID: _____

User Approval: _____ Date: _____

A. HCM/HR Access (Human Capital Management)

ACTION REQUESTED: (Please check only one)

☐ **ADD NEW** (Create new profile and complete **Option 1 or Option 2**)

☐ **UPDATE** (Modify existing profile)

- ☐ Keep current profile and add additional access (complete **Option 1 or Option 2**)
- ☐ Remove access from current profile (complete **Option 2**)

☐ **LOCK** (Lock out existing profile)

Comments (Optional): _____

SECURITY REQUESTED: (Please check only one)

☐ **Option 1: CLONE ACCESS***

I authorize the above user to inherit the same HCM/HR role access as the following user:

First Name: _____ Last Name: _____ MI:

Network/User ID: _____ EMPLID: _____ Job Title: _____

***Note**: Cloning will include the above user's functionality in the areas listed below:

- Department Security Access

☐ **Option 2: ROLE ACCESS** (List roles, what you're trying to do or pages you're trying to use. If removing access, please note in comments.)

- _____
- _____
- _____
- _____
- _____
- _____

Comments (Optional): _____

B. IH/Portal Access (Interaction Hub)

ACTION REQUESTED: (Please check only one)

Profile created automatically (Complete for additional access or locking profile ONLY)

☐ **ADDITIONAL ACCESS** (Modify existing profile)

- ☐ Add - Keep the existing security roles and add new roles (complete **Role Access** section)
- ☐ Remove - Remove the existing security roles (complete **Role Access** section)

☐ **LOCK** (Lock out existing profile)

Comments (Optional): _____

SECURITY REQUESTED:

☐ **ROLE ACCESS** (List roles, what you're trying to do or pages you're trying to use)

- _____
- _____
- _____
- _____
- _____
- _____

Comments (Optional): _____

C. FSCM/FIN Access (Financials)

ACTION REQUESTED: (Please check only one)

☐ **ADD NEW** (Create new profile and complete **Option 1** or **Option 2**)

☒ **UPDATE** (Modify existing profile)

- ☒ Keep current profile and add additional access (complete **Option 1 or Option 2**)
- ☐ Remove access from current profile (complete **Option 2**)

☐ **LOCK** (Lock out existing profile)

Comments (Optional): _____

SECURITY REQUESTED: (Please check only one)

☐ **Option 1: CLONE ACCESS***

I authorize the above user to inherit the same FSCM/FIN role access as the following user:

First Name: _____ Last Name: _____ MI:

Network/User ID: _____ EMPLID: _____ Job Title: _____

***Note**: Cloning will include the above person's functionality in the areas listed below:

- Business Unit Access
- Requisition/PO Setup
- Department Approval Authority
- Req/PO Approval Authority

☒ **Option 2: CUSTOM ACCESS** (Check all that apply)

DEPARTMENT ACCESS

☐ All CCC (includes District Office)

☒ Campus only (____, no District Office)

☐ Specific departments below:

_____ _____ _____
_____ _____ _____
_____ _____ _____
_____ _____ _____

ACCOUNTS PAYABLES

☐ Inquire Vouchers ☐ Enter Payments

☐ Enter Vouchers

COMMITMENT CONTROL/KK

☐ Enter Budget Transfer ☒ Budget Inquiry

☐ Enter Budget Journal

PURCHASING*

☐ Enter/Modify Reqs ☒ Approve Reqs

☐ Enter/Modify POs ☐ Approve POs

☐ Receive POs ☐ Buyer Authorization

* ***Deputy Procurement Officer approval required***

GRANTS

☐ Enter/Modify Proposal ☒ Approve Proposal

☒ Principal Investigator (PI)

Comments (Optional): _____

PURCHASING WORKFLOW DEPARTMENT APPROVAL AUTHORITY (Optional)**:**

Effective as of (mm/dd/yyyy): _____ (please check only one of the following):

☐ **Replace Department Manager** - I authorize the above user to replace the purchasing approval access of:

First Name: _____ Last Name: _____ MI:

Network/User ID: _____ EMPLID: _____ Job Title: _____

☐ **New Department Manager** - I authorize the above user to approve for the following Department IDs below:

_____ _____ _____ _____ _____ _____ _____ _____ _____ _____
_____ _____ _____ _____ _____ _____ _____ _____ _____ _____

* If you require additional departments, please include the department IDs in your Remedy/Help Desk ticket or in the comments below.

Comments (Optional): _____

TRAVEL & EXPENSE:

Travel & Expense user authorization is defaulted. Request additional authorization from AP (China Bouldin).

D. CS Access (Campus Solutions)

ACTION REQUESTED: (Please check only one)

☐ **ADD NEW** (Create new profile and complete **Option 1 or Option 2**)

☐ **UPDATE** (Modify existing profile)

- ☐ Keep current profile and add additional access (complete **Option 1 or Option 2**)
- ☐ Remove access from current profile (complete **Option 2**)

☐ **LOCK** (Lock out existing profile)

Comments (Optional): _____

SECURITY REQUESTED: (Please check only one)

☐ **Option 1: CLONE ACCESS***

I authorize the above user to inherit the same CS role access as the following user:

First Name: _____ Last Name: _____ MI:

Network/User ID: _____ EMPLID: _____ Job Title: _____

***Note**: Cloning will include the above user's functionality in all areas.

☐ Include the same Service Indicator access

☐ Exclude the Service Indicator access, but assign Service Indicator access as specified below:

_____

☐ **Option 2: ROLE ACCESS** (List roles, what you're trying to do or pages you're trying to use)

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

* If you require additional roles, please include the list in your Remedy/Help Desk ticket.

CAREER ACCESS: (Check all that apply)

☐ **Adult Ed** ☐ **Credit** ☐ **Continuing Ed** ☐ **Skills**

Comments (Optional): _____