

ESS DISTRICT ADMINISTRATOR SECURITY ACCESS REQUEST

*Using Adobe Reader, fill out the form completely. Save. Print. Only the District's Authorized Signer may sign the form.
Scan the completed form. Create an AccessPoint Service Request (<http://accesspoint.sccoe.org> TYPE: QCC Category: ESS). Attach the scanned form.*

ACTION DESIRED: <input type="checkbox"/> ADD NEW ESS ADMINISTRATOR <input type="checkbox"/> REMOVE ESS ADMINISTRATOR			
DISTRICT: _____			
LAST NAME	FIRST NAME	EMAIL	PHONE
EMPLOYEE ID		ESS USER ID	
POSITION TITLE		DEPARTMENT	MANAGER'S NAME

ACTION ADVISORY:

Employees authorized for a **District ESS Administrator** role will have access to view the district's employee personnel and payroll information. They will also have the ability and be responsible for:

- Managing the district's ESS page,
- Enrolling new users and deleting users in ESS,
- Accessing user ids, and
- Resetting employee ESS passwords.

As the District Authorized Signer, I acknowledge that I am responsible for authorizing and monitoring the access privileges of the District ESS Administrators, which includes removing a terminated employee from the role in a timely manner via an ESS District Administrator Security Access Request form.

AUTHORIZED SIGNATURE			
_____	_____	_____	_____
Date	Authorized Signer Name (please print)	Authorized Signer Signature	Phone

TSB STAFF:			
TSB: Rec'd _____	ServReq # _____	QSS ID _____	Completed _____ LF _____