

**Instructions:** Complete form, then obtain appropriate approval. Please send completed forms to the Information Security Office (zip 0042) or [cmssecadm@sjsu.edu](mailto:cmssecadm@sjsu.edu). Adobe Acrobat signatures are not accepted.

**REQUESTOR INFORMATION**

Name: \_\_\_\_\_ Employee /SJSU ID (not SSN): \_\_\_\_\_  
 Position/Job Function: IT Service Desk Student Department: 1207 – IT Service Desk  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**ACCESS REQUESTED**

Human Resources	Campus Solutions	Finance
Primary Permission List: RESETPWD  Row Security: DP1143  Process Profile: SJ_HR_PROCESS_PERMISSIONS  Roles: RESETPWD SJ_AD_EXTERNAL_VIEW SJ_CMS_HELPDESK		
Additional Access Requested:  		

Department ID(s) Requesting Access to: \_\_\_\_\_  
 Organization Tree<sup>1</sup>: (indicate level) \_\_\_\_\_

**MANAGER APPROVAL (SUPERVISING MPP OR DEPARTMENT CHAIR/DIRECTOR ONLY)**

By signing this form, I approve this employee for access requested below, including access to confidential student and/or employee data.

MPP Name: \_\_\_\_\_ Employee /SJSU ID (not SSN): \_\_\_\_\_  
 Title: Director – Service Desk Department: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**SECURITY TEAM USE ONLY**

Security Administrator: \_\_\_\_\_ E-mailed: \_\_\_\_\_  
 System/Database: \_\_\_\_\_ System/Database: \_\_\_\_\_  
 User ID: \_\_\_\_\_ User ID: \_\_\_\_\_  
 Date Created/Updated: \_\_\_\_\_ Date Created/Updated: \_\_\_\_\_  
 Roles Granted: \_\_\_\_\_ Roles Granted: \_\_\_\_\_

<sup>1</sup>Organization Tree refers to access to all DeptIDs belonging to a Division, Dean’s Office, Organization or College.