

HR Laserfiche Access Request

USER INFORMATION		□ NEW □	CHANGE REMOVE			
Employee Name:			Employee Phone:			
Employee E-Mail:			Employee UIN:			
TAMU NetID:			FAMIS UserID			
TAMU NetID is required for Laserfiche a	access; if this is i	blank the form will be returne	<u></u>			
FOLDER ACCESS		Select all folders be (The folders listed b	eing requested. pelow may not be available for all l	members)		
TAMUS-HRC Reposito	<u>ry</u>					
O HRC-SBA Editors						
O HRC Scanners		Scanning & Valida	Scanning & Validating Scanned Documents from HRConnect			
O Payroll Officers		Access Historical	Access Historical BPP Payroll Earnings Reports			
O Payroll Earnings Ad	min	System Workday Employees only				
TAMUS-FAMIS Report	s Repos	<u>itory</u>				
O HRIS	HRIS Reports from the State, reports includes are the Quarterly Veterans hiring report, EEO report, Statewide Hiring Practices etc. Please select members being requested below					
O 01- TAMUS	O 02-		O 04 - TSU	O 05- PVAMU		
O 06- AL-RSCH	O 07-	- AL-EXT	O 09- TEEX	O 10- TAMUG		
O 11- TAMFS	O 12-	- TTI	O 15- TAMUCC	O 16- TAMIU		
O 17 - TAMUK	O 18-	- WTAMU	O 20 - TVMDL	O 21- TAMUC		
O 22 - TAMUT	O 23-	- HSC	O 24- TAMUCT	O 25- TAMUSA		
O 26 - TSSC	O 28 -	- TEES	O 30 - TDEM			
	O All I	Member Inquiry (Lin	nited, must have All Member FA	MIS Inquiry Access)		
COMMENTS		Please add any add	ditional comments regarding your	access		



HR Laserfiche Access Request

Name: UIN:

STATEN		

I understand that I will be in violation of System regulations, State and Federal law if I gain or help others gain unauthorized access to the systems above. I acknowledge that neither I nor anyone else possess the authority to allow anyone to use my ID or password. I understand that if I violate System regulations and State and Federal laws by gaining or helping others gain unauthorized access, I will be subject to disciplinary action and criminal prosecution to the full extent of the law. (Chapter 33, Title 7 of the Texas Penal Code). I accept the responsibility of keeping the reports and information confidential. I understand, accept and will complete training related to the software provided to me by Texas A&M System Members. Misuse or abuse of this responsibility as User/Supervisor may be just cause for revocation of software access and disciplinary action. I agree further not to attempt to circumvent the computer security system by using or attempting to use any transactions, software, files or resources I am not authorized to use.

| User Printed Name | Signature | Date | Date

SUPERV	ISOR APPROVAL
Approved:	Request must be approved by your supervisor. Please forward the completed request form to your supervisor. If access is approved, they should forward on to FAMIS Services at the email address listed below.
Signature	Date

SUPERVISORS

Please scan and email approved form to: <u>FAMIS-Security@tamus.edu</u>

Please include 'Laserfiche Access' in the subject line of the email.

If there are any questions, please call the FAMIS Help Line, (979) 458-6464.

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