Security Account Request Form

Revised 2/25/2016

Please print or type.

Submitted by: _____ District: _____

Employee Name: _____ Building: _____

Phone: _____ Preferred Email Address: _____ Date: _____

Usernames will be a unique and permanent NCC assignment, including the employee's last name as written.

***Please Circle** M for modify access or R for read only access or M/GM for modify with General Manager access*

Fiscal Services: **Accounting and Payroll Access**

☐ Payroll → M or R or M/GM ☐ Accounts Receivable → M or R ☐ Personnel → M or R

☐ Accounting → (M) or (Read all & enter reqs) or (Requisition Entry ONLY) or (M/GM)

Web Reports

☐ Monthly USAS ☐ PayrollCD ☐ FiscWeb

Inventory

☐ Equipment Inventory → M or R

Historical Data

☐ All previous years financial/staff data

USASDW/SSWAT: ☐ Accounts ☐ Vendors ☐ Transactions ☐ Requisitions ☐ Accounts Receivable

Historical EMIS Services: ☐ Financial Data ☐ Staff Data ☐ Staff EMIS source data in USPS

Treasurer's Signature: ***Date***:

EMISr & FFE security access – REQUIRES BOTH TREASURER AND SUPERINTENDENT SIGNATURES

☐ LEA Collector ☐ LEA Submitter ☐ LEA Reviewer ☐ Flat File Editor (FFE)

Historical EMIS Services: ☐ Student Data ☐ EMIS Web Reports

PDMS (IPDP): ☐ LPDC user ☐ LPDC committee member License #_____

StudentInformation (use separate sheet as necessary – include role and school code, or role and *"district"* to denote access to all buildings)

_____

_____

Teachers: ☐ Attendance ☐ Marks ☐ Fee collect **Circle EZ Query restrict to teacher:** No or Yes

ITC Information (to be completed by NCC)

Account Type	Username	System	Created By	Created On
☐ VMS				
☐ PB Suite				
☐ USASDW				
☐ EMISr				

This request will not be processed until this form has been returned to NCC with the appropriate signatures. The employee's signature below states that you have read and agree to abide by the NCC Data System Security Policy. Treasurer's signature needed only if the employee is requesting access to financial data from the first Fiscal/EMIS box above. Superintendent's signature is needed if the employee is requesting access to any system outside of the financial data from the first Fiscal/EMIS box above.

Employee: _____ Date: _____

Superintendent: _____ Date: _____

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