

### PRISM Access Information Form

Please complete the following form to establish or modify access to PRISM applications. Once completed, please return this form to FIS Customer Assessment located at 1917 Cathedral of Learning or fax to 412-648-0341. To schedule training, view on-line demos or if you have any questions, please refer to our website at [www.cfo.pitt.edu/prism](http://www.cfo.pitt.edu/prism).

Please choose one:             New User             Existing User             Access Termination

Effective Date: \_\_\_\_\_ Last 4 of Social Security Number: xxx – xx – \_\_\_\_\_

Requester: \_\_\_\_\_

Print full "Legal" Name: \_\_\_\_\_

Department or Division Name: \_\_\_\_\_ Responsibility Center #: \_\_\_\_\_

Preferred Email Address: \_\_\_\_\_

My Current Network Authorization Account is : \_\_\_\_\_

Or My Current PRISM Account User ID is : \_\_\_\_\_

\* To get your printer setup for PRISM, please submit a help ticket at [www.technology.pitt.edu](http://www.technology.pitt.edu) or call 624-4357.

<b>NON Pitt Employees Only:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male Birth Date: _____ SSN: _____	<b>FIS USE ONLY</b>
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Additional Comments: \_\_\_\_\_

<u>Authorization:</u> As the requester, I affirm that I have read and understand University Computing, Information, and Data Policies: 10-02-04            ( <a href="http://www.cfo.pitt.edu/policies/policy/10/10-02-04.html">http://www.cfo.pitt.edu/policies/policy/10/10-02-04.html</a> ) 10-02-05            ( <a href="http://www.cfo.pitt.edu/policies/policy/10/10-02-05.html">http://www.cfo.pitt.edu/policies/policy/10/10-02-05.html</a> ) 10-02-06            ( <a href="http://www.cfo.pitt.edu/policies/policy/10/10-02-06.html">http://www.cfo.pitt.edu/policies/policy/10/10-02-06.html</a> ) and will abide by these policies, and use the requested data access only as required in the performance of my University duties.
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As the supervisor for the requester, I affirm this request is in accordance with the requester's job function. I will be responsible for taking the appropriate change action, if the requester has a change in employment status.
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Requester Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

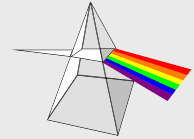
Supervisor Printed Name: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Authorized RC Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Customer Assessment:
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System Administrator:
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**PRISM Access Information Form**

**DEPARTMENT/AREA Responsibility Request**

Please choose the necessary responsibilities and one appropriate action.

**PRISM TRKS Administrators**

Add       Delete

**PRISM TRKS Department Administrator (STAFF ONLY)**

Submit and/or view PRISM TRKS reports which will include only those staff within the department in which the administrator is employed.

- PTEE601 Retro Hourly Reconciliation Dept Admin
- PTEE810 Weekly Timecard (Export to Excel)
- PTEE811 Timecard History by Person (Export to Excel)
- PTEE812 Time Off Balances (Export to Excel)
- PTEE815 Time Off History Dept Admin
- PTEE817 Weekly Timecard After Transfer Dept Admin
- PTEE819 NEAD Account Number Extract (Export to Excel)
- PTER211 Missing Timecard Report (Printable Only)

Add       Delete

**PRISM TRKS RC Administrator (STAFF ONLY)**

Create, update and submit timecards as necessary for those staff in departments reporting to the responsibility center. View and/or submit PRISM TRKS reports which will include those staff in departments reporting to the responsibility center.

- Time Entry (Create Timecard for Employee)
- PTEE601 Retro Hourly Reconciliation RC Admin
- PHRE337 Distributed Comp Time/Overtime Extract (Export to Excel)
- PTEE810 Weekly Timecard (Export to Excel)
- PTEE811 Timecard History by Person (Export to Excel)
- PTEE812 Time Off Balances RC Admin
- PTEE815 Time Off History RC Admin
- PTEE817 Weekly Timecard After Transfer RC Admin
- PTEE819 NEAD Account Number Extract (Export to Excel)
- PTER211 Missing Timecard Report (Printable Only)

\*\*\*This section is for use by the Application ASA only:

ASA Approval:

Date: