

UMKC COMPUTING SERVICES
REQUEST FOR CICS ACCESS

Date: _____

Requester's name: _____ Charge Back #: _____
(Office Manager) (Computer
Account #)

Fund Code # K-__-_____-9600(Supply Fund Code **ONLY** if you do not have a **Charge Back #**)

.....
____ (+) Add User _____ (*) Change User Authorization _____ (-) Delete User

User's Name (+,*, -) _____ SS# (+) _____

Department (+) _____ Phone # (+) _____

User ID (*,-) KK _____ First time Password => **OPEN**
(Supply KK number on **Changes** or **Deletes** only)

Desired CICS Functions / Operator Classes / Database Custodian Signatures
(requested by Office Mgr)/(Assigned by DC) / (DC signature)

CICS1

Financial Records _____ Signature _____

Systems (FRS)

Microfilm Indexing _____ **Acctg & Stu Loans** (Mary Ann Richey)

Loan Management(LMS) _____ Signature _____

Acctg & Stu Loans (Dave Osborn)

Position Info Mgmt _____

Employment History _____

Employee Info _____

Seniority Info _____

Data Entry _____

Payroll Audit _____

Signature _____

Retiree Info _____

Human Resources (Carol Fitzpatrick)

Vacation/Sick Leave _____

(Jane Peterson)

Staff Benefits _____

System Tables _____

CICS2

Student Info.(SIDES) _____ Signature _____ AU _____

Registrar (Wilson Berry)

CICS4

Student Fin. Aid _____ Signature _____

Financial Aid (Michael Passer)

(Carol Rotach)

By signing below I understand that any access given to me is for University purposes as part of my job and that I have responsibility to exercise due care to protect this information from unauthorized disclosure by safeguarding my password(s) and ensuring that the data I obtain is disseminated only through approved University channels. Unauthorized access and unauthorized dissemination of data are serious offenses, which may subject me to prosecution.

User's Signature _____