



Ensure that the most current form is submitted. Refer to EMACS Forms/Procedures website.

SECURITY ACCESS REQUEST FOR EMACS

ONE FORM PER POSITION

Add Position Security Revise Position Security Delete Position Security

Must print in Black or Blue Ink ONLY

Position No.	Employee ID	Employee Name

Note: Access may be granted by an individual department ID or a range of department IDs

Please ADD the following Department ID ranges to the access type(s) checked below:

<i>Dept. From</i>	<i>Dept. To</i>	<i>Dept. From</i>	<i>Dept. To</i>	<i>Dept. From</i>	<i>Dept. To</i>
-------------------	-----------------	-------------------	-----------------	-------------------	-----------------

Please DELETE the following Department ID ranges to the access type(s) checked below:

<i>Dept. From</i>	<i>Dept. To</i>	<i>Dept. From</i>	<i>Dept. To</i>	<i>Dept. From</i>	<i>Dept. To</i>
-------------------	-----------------	-------------------	-----------------	-------------------	-----------------

For information on what each access type encompasses, refer to policy and procedure manual

SECURITY ACCESS

- | | |
|---|---|
| <input type="checkbox"/> Payroll Specialist | <input type="checkbox"/> Phone Coordinator |
| <input type="checkbox"/> Manager/Supervisor | <input type="checkbox"/> Modified Duty Representative |
| <input type="checkbox"/> Budget Preparation | <input type="checkbox"/> Other: _____ |

ETIME ACCESS (eTime Departments Only)

- | | |
|--|---|
| <input type="checkbox"/> DTA – Departmental Time Administrator | <input type="checkbox"/> DTR – Departmental Time Reporter |
| <input type="checkbox"/> DSA – Departmental Security Administrator | <input type="checkbox"/> Read Only Access |

ONLINE PERSONNEL REQUISITION / NEOGOV (System Application Set-up)

- | | |
|--|--|
| Role: | *Approval Level: |
| <input type="checkbox"/> Requestor | <input type="checkbox"/> Department |
| <input type="checkbox"/> Hire Processor | <input type="checkbox"/> Administrative |
| <input type="checkbox"/> Approver (Select approval level)* | <input type="checkbox"/> Department Head |

* Select appropriate approval level when Approver Role is selected

Other/Comments _____

~ All signatures must be obtained for Security Request to be approved and entered into EMACS ~

Department Contact (Print Name)	Department	Phone Number	Date
**Appointing Authority or Designee Name (Print & Sign)		Phone Number	Date
Human Resources Officer (HRO) Signature (Print & Sign)		Phone Number	Date

** Appointing Authority understands it is the departments responsibility to maintain and update position security as employees move in and out of the department

DISTRIBUTION:

Security Access Form– EMACS Development Team (0440) - EMACS-SecuritySupport@hr.sbcounty.gov
Online PR/NEOGOV- send additional copy to: HR-Employment (0440) – Employment@hr.sbcounty.gov

Keyed By (Employee ID)	Date