



SERVICE REQUEST FORM

SOP-HRR-001-F10

Once completed, please email this form to "Service Request" distribution list.

Request Date: _____ Start Date: _____

POSITION INFORMATION	
Position Title:	Position #:
Office Building:	Suite/Room #:
Bureau Name:	
Supervisor:	Supervisor Phone:

EMPLOYEE INFORMATION	
<input type="checkbox"/> New Employee <input type="checkbox"/> Change Request <input type="checkbox"/> Contractor	
Employee Name:	Employee Nickname:
Shirt/Jacket Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Work Address:	
Shared Folder Access: <input type="checkbox"/> Read <input type="checkbox"/> Write <input type="checkbox"/> Disable	Shared Folder Access Path:
Desk Phone: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Active	Cell Phone: <input type="checkbox"/> Apple <input type="checkbox"/> Android
Email Address Format:	

ADDITIONAL EMAIL ACCESS INFORMATION (Please Check One)
Name of Additional Mailbox: _____
Access Level: <input type="checkbox"/> Read/Manage <input type="checkbox"/> Read/Manage, Send As <input type="checkbox"/> Read/Manage, On Behalf Of <input type="checkbox"/> Read/Manage, On Behalf Of, Send As <input type="checkbox"/> Remove Access
Employees are given access to applicable Program Files on the J: drive. Additional folder accesses may be requested for employee to perform assigned duties.

EMPG Grants Mgmt.		DHS Grants Mgmt.		Recurring Expenses	
Reports from Reports Library:					
Budget		Payroll		FLAIR	Other:

INFORMATION TECH. MANGEMENT (ITM) SYSTEMS: Enter an "E" for Enable							
OASIS		HSIN		E-GRANTS	DEMES	Everbridge	
Grant Awards		Power DMS		FTP Account(s) Name:			
Secure FTP Account Name(s):			Other:				

