

Additional Users – Human Resources Portal Access Form

I. DISTRIBUTION CODE INFORMATION

Requested DC: _____ **Requested Effective Date:** _____ The users listed below represent the additional current users that the PI of Record is granting access to their project number(s) and employee information under the requested DC. If an individual is not listed they will not have access under the requested DC. A memo from the PI must always be attached to the request to justify the additional users.

II. LIST ALL ADDITIONAL USERS

Action <small>Add or Update</small>	Access Type	Name / Email / Phone	HR Portal Applications		Employer	Attach if Adding RCUH Employee		
			All	Time Only	RCUH, UH, or Other	PNF	FMO-1	JD

III. CANCEL USER ACCESS: _____

IV. PRINCIPAL INVESTIGATOR – ACKNOWLEDGEMENT & APPROVAL

I hereby acknowledge and approve access to the users listed above for the requested DC. I'm ultimately responsible for certifying the accuracy and authenticity of all transactions and time reporting processed for employees, regardless of additional system access granted to the users listed above. I will convey the importance and definition of the access type, duties, and responsibilities to the listed users that I have granted access.

Signature: _____ **Date:** _____

RCUH FINAL REVIEW (RCUH ONLY)

Signature of Final Reviewer Date

Complete Package Received: Input: Date: Log

Effective Date: Email

Attach. B: Required Exempt Edit: Date: Scan