

DATA PROCESSING INFORMATION SERVICE REQUEST

Office/Department:

Name: _____ **Desired completion date:** _____

Phone Number: _____ **Project Request Date:** _____

Intranet Posting:
Start Date _____ **End Date** _____

Authorized/Department Head Signature (Required)

Application Authorization Signature
 (Required if accessing an application that is outside your own department)

Data Processing Use Only

Request #: _____ **Priority:** _____

Project Assigned To: _____

Date Assigned: _____ **Date Completed:** _____

Projected Completion Date: _____ **Hours worked:** _____

This Section is MANDATORY

General Fund? (check one)
 YES NO

If NO, or requesting Internet Access, enter OCA Code: _____

Security Information

Employee Name(s) (Please Print):

N T U

For each name, check one indicating if the employee is either:
 N- new employee. T – terminating employee. or U – Updating existing

Internet Access (Requires OCA, \$65.00 charge)

DP Administrative Assistant:

Firewall / Internet Team:

Applications (Check each that applies)

E-mail Tax Mapping Case Management

Real Estate Treasurer Telecommunications

Financial Intranet Payroll/Personnel

KRONOS Imaging Personal Property

Scale System Sanitary Utility Billing

Recorders JFS/SEA

Description: (Attach extra sheets if necessary)

Data Processing Use Only

Systems

ADS AS/400 SUN 5000

Oracle H70 SUN 3500

Dial-Up RISC/J40

Technical Service Manager: _____ **Date:** _____

Application Manager: _____ **Date:** _____

Operation Manager: _____ **Date:** _____

Director of Data Processing (Required): _____ **Date:** _____

- An Employee's security will automatically expire within two weeks after termination from payroll. -

PLEASE RETURN TO: DATA PROCESSING HELP DESK