



CENTRAL WASHINGTON UNIVERSITY

HRMS Access Form
(Human Resource Management System)

Please complete the following information for access to the human resource management system and FAX to Steven Herrera at 1733.

Name: _____ Employee ID: _____

Title: _____ Novell Logon Username: _____

Telephone: _____ Department: _____

For time keeper access, indicate the time keep location and whether you will be the backup or primary time keeper.

Time Keep Location: _____ Primary
 Back Up

Department Authorizing Signature: _____

For additional access, justify reason for higher-level security.
Describe function or access needs:

Department Authorizing Signature: _____

For HR Department Use

Approval:

HRMS: _____ Date: _____

Data Custodian: _____ Date: _____