

HISD DOCUMENT IMAGING SERVICES



AUTHORIZATION FOR ACCESS REQUEST AppEnhancer – HUMAN RESOURCES

Use this form to request authorization to access online HR documents in AppEnhancer

□ New Authoriza	tion \square Add	□Delete		
Employee's Last Nan	ne:	First Name:		
User Network Login Name:		Employee ID #:		
Department Name:		Position/Title:		
Location:				
DEPARTMENT APPLICATIONS – Check √ <u>all</u> applicable groups:				
☐ HR – CONFLICT OF INTEREST FORMS		│ ☐ HR – EMPLOYEE RELATIONS		
☐ HR CONTRACTS				
HR – EMPLOYEE RECORDS TERMED		; ; —		
HR PERSONNEL RECORDS		│		
A				
Approved:		Approved:		
Director, Employee Services		Executive Dir., Employee Relations		
Print:	Date:	Print: Date:		
Check √ one as appl	Check √ <u>one</u> as applicable:			
	Security Group Name	Security Group Privileges		
	AD_HR_COMP_SAL	Compensation and Salary - View_Print		
	AD_HR_Back	Criminal Background - View_Print		
	AD_HR_EMP_EVAL	Employee Evaluations - View_Print		
	AD_HR_EMP_RELA	Employee Relations - View_Print		
	AD_HR_BUS_PART	HR Business Partners - View _Print		
	AD_HR_OPER_GR1	HR Ops - Certifications - View_Print		
	AD_HR_OPER_GR2	HR Ops - File Room - View_Print		
	AD_HR_OPER_GR3 AD HR CAP ACCT	HR Ops - Services - View_Print Human Capital Accountability - View_Print		
	AD_HR_ADMIN	Human Resources - Admin - View-Print		
	AD_HR_INT_AUDIT	Internal Audit - View_Print		
	AD HR LEGAL	Legal - View_Print		
	AD HR ONBOARD	Onboarding and Org Development - View_Print		
	AD_HR_REC_SELECTION	Recruitment and Selection - View_Print		
Access will not be granted without signatures and dates. Incomplete forms will be returned.				
Access will not be granted without signatures and dates. Incomplete joints will be retained.				
Approval By:	Approval By: Date:			
Approval By: Date: Executive Dir., Employee Services				
Printed Name:				
***** DOCUMENT IMAGING SERVICES DEPARTMENT USE ONLY *****				
☐ Assigned to AX Security Group				
☐ Assigned to License		ed by: Date:		