



AUTHORIZATION FOR ACCESS REQUEST
AppEnhancer – HUMAN RESOURCES

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

New Authorization
 Add
 Delete

Employee's Last Name: _____ First Name: _____

User Network Login Name: _____ Employee ID #: _____

Department Name: _____ Position/Title: _____

DEPARTMENT APPLICATIONS – Check v all applicable groups:

- HR – CONFLICT OF INTEREST FORMS
- HR -- CONTRACTS
- HR – EMPLOYEE RECORDS TERMED
- HR -- PERSONNEL RECORDS

Approved: _____
 Director, Personnel Records
 Print: _____ Date: _____

- HR – EMPLOYEE RELATIONS
- HR – NON-RENEWED TERMED EMPLOYEE RECORDS

Approved: _____
 Sr. Executive Dir., Professional Standards
 Print: _____ Date: _____

- HR – CRIMINAL BACKGROUND REPORTS

Approved: _____
 Executive Dir., Investigations
 Print: _____ Date: _____

Check v one as applicable:

Security Group Name	Security Group Privileges
AD\OTG_HR_COMP_SAL	Compensation and Salary - View_Print
AD\OTG_HR_EMP_EVAL	Employee Evaluations - View_Print
AD\OTG_HR_EMP_RELA	Employee Relations - View_Print
AD\OTG_HR_BUS_PART	HR Business Partners - View_Print
AD\OTG_HR_OPER_GR1	HR Ops - Certifications - View_Print
AD\OTG_HR_OPER_GR2	HR Ops - File Room - View_Print
AD\OTG_HR_OPER_GR3	HR Ops - Services - View_Print
AD\OTG_HR_CAP_ACCT	Human Capital Accountability - View_Print
AD\OTG_HR_ADMIN	Human Resources - Admin - View-Print
AD\OTG_HR_INT_AUDIT	Internal Audit - View_Print
AD\OTG_HR_LEGAL	Legal - View_Print
AD\OTG_HR_ONBOARD	Onboarding and Org Development - View_Print
AD\OTG_HR_REC_SELECTION	Recruitment and Selection - View_Print

Access will not be granted without signatures and dates. Incomplete forms will be returned.

Approval By: _____ Date: _____
 Sr. Executive Dir., Professional Standards

Printed Name: _____

******* DOCUMENT IMAGING SERVICES DEPARTMENT USE ONLY *******

- Assigned to AX Security Group
 - Assigned to License Group
- Completed by: _____ Date: _____