

PSD125A – Add New User Form (CSU)

DEPT/CAMPUS ID:	
Requested Date:	

EMPLOYEE NAME ----- LAST, FIRST, MI	USER ID	P I M S	H I S T	K E Y M	P I P	M I R S	C S P	L A S	M P C	V I E W	A C A S	C O N N E C T H R	REMARKS

STATE CONTROLLER USE ONLY		As the duly appointed authority, I hereby accept responsibility for this authorization and certify that granting access to confidential employee data for the above named individuals is in accordance with their constitutional or statutory duties as mandated in the Information Practices Act.	
SCO/PPSD SECURITY MONITOR APPROVAL (SIGNATURE)	DATE	AUTHORIZATION - OFFICIAL (SIGNATURE)	DATE
ISO OWNER/CUSTODIAN APPROVAL (SIGNATURE)	DATE	ACKNOWLEDGEMENT - SECURITY MONITOR (SIGNATURE)	DATE

RETAIN THIS COPY FOR YOUR RECORDS