



Instructions: To request or cancel user security authority to process hires in PeopleAdmin/EPAF. Type or print information in applicable sections. Submit form to ICT-University Computer Center by fax to 8 646-2699 (fax must be dialed as 8 646-2699 even if on campus), or scan and e-mail to: [security\\_admin@nmsu.edu](mailto:security_admin@nmsu.edu). Please retain a copy for your records.

**SECTION 1: REQUESTOR INFORMATION**

Employee Name (Last, First): \_\_\_\_\_ Aggie ID: \_\_\_\_\_

Position Title: \_\_\_\_\_ College/Division: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Date Access Required: \_\_\_\_\_

**SECTION 2: REQUEST DETAILS**

**PEOPLE ADMIN** **Note 1:** All roles added will automatically be set up to receive informational e-mails. E-mails can be individually managed by the user upon gaining access. **Note 2:** Please utilize page two if you have more than 1 department to list for Dept Org.

Add  Remove **Department Authority:** Authority to initiate the action and submit/route to the Approving Authority.  
Dept. Org: \_\_\_\_\_ - \_\_\_\_\_ (i.e. 100000 - Department Name)

Add  Remove **Approving Authority:** Authority to initiate staff actions and submit/route for HR approval. Authority to initiate and approve faculty actions. Must be a Campus President, Dean, Vice President or official designee.  
Dept. Org: \_\_\_\_\_ - \_\_\_\_\_ (i.e. 100000 - Department Name)

Add  Remove **Search Committee:** Serves as internal or external voting member of search committee with authority to review and evaluate applicants when assigned to a particular search. Search Committee Chair may be assigned as part of posting process under this user type.  
Dept. Org: \_\_\_\_\_ - \_\_\_\_\_ (i.e. 100000 - Department Name)

**EPAF** - Please utilize page two if you have more than 1 department to list.

Add  Remove **EPAF Originator:** Authority to originate EPAF transactions and submit/route for approval.

Add  Remove **EPAF Approver (Dean/VP):** Authority to approve EPAF transactions. Must be a Campus President, Dean, Vice President or official signature authority designee.  
Dept. Org: \_\_\_\_\_ - \_\_\_\_\_ (i.e. 100000 - Department Name)

**SECTION 3: REQUESTOR APPROVAL**

By signing this form, you acknowledge that you have read and understand your responsibilities as they pertain to data/information security outlined in section 2.35 of the NMSU Policy Manual.

Employee Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 4: OFFICIAL APPROVAL**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Dean/VP/CC President (Delegates not authorized to sign)

