

# NFC REQUEST FORM

Fill out this form to request access or change existing access to NFC. Form must be filled out completely and accurately to be accepted. Note: NFC requests can take 3-4 weeks for processing.

1. Request Type: (Check applicable box)

- New User                       Transfer To  
 Change User                       Transfer From  
 Revoke User

## USER INFORMATION

2. Last Name:		3. First Name:	
4. FI Number: (i.e., FI9999)		5. Social Security Number: (New User Requests Only) XXX - XX -	
6. Program:	7. Phone Number: (1234567890)	8. E-mail: (firstname.last@usda.gov)	
9. Name of Supervisor:		10. Name of Timekeeper:	

11. Request Access To:

- webTA       Reporting Center       FFIS       TRAV       PINQ       IRIS       CULPRIT
- TUMS       Other (Specify):

12. If webTA Access is Checked above, Indicate the Kind of Access you Need:

- Employee                       Timekeeper                       Supervisor

13. Contact Points Needing Access: (e.g. 37-19-8550-10-81)

To: 37-    -    -    -  
From:    -    -    -    -

14. Reporting Center Access:

15. Additional Information:

16. Rules for Accessing NFC:

1. Protect ID and Password
2. Keep ID Active
3. Logout when you leave PC
4. You have access to sensitive data, no sharing or disclosing information about any employee or disciplinary actions will be taken and or ID revoked

(If submitting electronically, a typed signature below is acceptable)

17. Signature:	18. Date: (mm/dd/yyyy)
19. Supervisor Signature:	20. Date: (mm/dd/yyyy)

**Please note: If you are electronically submitting this form, a response will be sent back to the user and Supervisor. Remember to 'Save As' before clicking the submit button.**