



PAYROLL SECURITY ACCESS FORM
For Central Offices and BFSCs

Fax Per Session & Per Diem form to (718) 935-2350 Attention: Tami Biddle
Fax EIS and NYCAPS forms to (718) 935-5294 Attention: Janet Forbes

SECTION 1.

User Information – please print clearly or type

Last Name _____ First Name _____

Location Address _____

District _____ Borough _____ School _____ Zip Code _____

Entire District _____ Central _____

Additional Work Location (District, Borough, School) _____

Work Telephone Number (including area code) _____ Ext. _____

Mother's Maiden Name _____ Job Title _____

Social Security # _____ Department Name _____

File ID _____

Do you have an existing Production ID & password Y _____ N _____ (Payroll, FAMIS)

If yes, what is your current userID and District _____

Add _____ Change _____ Delete _____

By receiving a userid I accept the responsibility for its proper and official usage. I have signed the Acknowledgment of Receipt of Mayoral Directive 81-2.

Place a ✓ indicating the system from which you are requesting access:

System: NYCAPS _____ EIS _____ Per Session (Pedagogic only) _____ Per Diem _____

(Place a if summer access only) _____

Profile: _____ (i.e; entry only, approval, inquiry only)

SIGNATURE: _____ DATE _____

BFSC/Central Authorization:

SECTION 2.

Director or Above Signature _____ Date _____

SECTION 3.

Central Authorization Signature _____ Date _____

SECTION 4.

FOR USE BY EIS, Per Session/Per Diem SECURITY OFFICE ONLY:

Security _____ Profile _____

Add _____ Change _____ Delete _____

Date Completed _____