

Self Service Access Form

This form should be used when:

- an employee needs to be set up with access to the HRMS Self-Service system
- a user's level of Self-Service access needs to be amended or
- a Contingent Worker is leaving the organisation so that their access can be end dated. Access for an employee will be automatically end dated from their leaving date.

Pre-requisites:

- The request for Self-Service access for a new employee can only be made once the HRMS record has been created and an employee number is available. Managers can obtain the number from their Manager Self-Service access.
- All fields must be completed and it is the manager's responsibility to ensure the details are correct, and provided in a timely fashion. Incomplete forms will be returned to the manager.
- If a Contingent Worker is leaving the organisation, please ensure that the HR Service Centre has been notified of the termination details as soon as possible. If the employee/Contingent Worker has direct reports, you will need to complete the [Change to Supervisor Hierarchy Form](#).
- If you are a Head of Service or above and require a delegated user to undertake HRMS transactions on your behalf please complete the [Request for Delegated User Form](#) which can be found under the section called 'Administration and Personal Information'.
- Guidance on using Self-Service can be found on the [Staff and Practitioners](#) website.

The completed form must be attached to an ICT Service Desk Online request.

Employee Details

Note: All fields are mandatory

Forename(s)	
Surname	
Team	
HRMS Employee Number	
Employee's Work Email Address (e.g. trishbloggs@warwickshire.gov.uk)	
Employee Network ID - the username you use to sign on to the PC (e.g. TBLO1)	
Do they have employees reporting directly to them for Self-Service? If Yes, does the user work in Safeguarding or	<input type="checkbox"/> Yes <input type="checkbox"/> No

Social Care and Support Services?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Additional Details

Please identify the reason for this request by checking the correct box below:		
<input type="checkbox"/> New Employee to WCC	<input type="checkbox"/> Contingent Worker Leaving WCC	
<input type="checkbox"/> Change needed to employee's existing Self-Service Access (<i>e.g. their delegated access needs to be removed</i>). This does not include changes to their supervisor hierarchy which must be notified via the Change to Supervisor Hierarchy Form).		
If a <i>change is needed to employee's existing access</i> , please provide details below.		
Employee Start Date / Effective Date of Change		

Manager's Declaration

I confirm that I am the manager responsible for this employee / Contingent Worker. I have the authority to enact this change, and the information provided above is accurate and complete. I understand that it is a disciplinary offence to knowingly give false information.		
Job Title		
Name	Contact Tel. No.	
Signature	Date	

** If this form is emailed from a valid individual email account then a signature will not be required.*

FOR OFFICE USE ONLY	
Date Received:	Date Actioned:
Actioned by:	