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| **FCIC-586** **U.S. Department of Agriculture**  (Rev. 11-09) Federal Crop Insurance Corporation  **RMA SECURITY ACCESS AUTHORIZATION FORM**  **For Assistance, contact the RMA-Security Staff at 816-926-7320** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NACI STATUS:  Initiated  Adjudication  Complete | | | | | | | | | | | | 1. REQUEST DATE | | | | | | | | |  | | |
| 2. REQUEST TYPE | | | | | | | | | | | |
| NEW | | | | | DELETE | | | | | CHANGE | |
| 3. Last Name | | | | | | | | | | | | | | | | | | | | | | | First | | | | | | | | | | | | | | | | | | | | | | | | | M.I. | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| 4. EMPLOYEE  TYPE: | | | RMA | | | | | | | | Contractor/Vendor | | | | | | | | | | | | | | | | | | AIP | | | | | | | | | | | | | | | | Temporary Access | | | | | | | | | |
| Specify: | | | | | | |  | | | | | | | | | | | Specify: | | | | | |  | | | | | | | | | | End Date: | | | | | |  | | | |
| 5. Job Title | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 6. Phone | | | | | | | | | | | | | | | 7. Fax | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | |
| 8. Agency | | | | | | | | | | | | | | | | | 9. Office | | | | | | | | | | | | | | | | | 10. Division | | | | | | | | | | | | | | | 11. Branch/Section | | | | | |
|  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | |
| 12. Employee Supervisor Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 13. Title | | | | | | | | | | | | | | | 14. Phone | | | | | |
| **SYSTEMS ACCESS INFORMATION (Check all applicable boxes)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **LAN** | | | Domain: | | | | | | | | | | | | Groups: | | | | | | | | | | | | | | | | | | | | | | | | **E-MAIL  Workstation Hardware** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| **Office Communicator** (Instant Messenger) | | | | | | | | | | | | | | | | | | | | | | | | | **CARS Role: Team:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Remote Access Services** | | | | | | | | | | | | | | | | | | | | | | | | | Dial-Up | | | | | | | | | | | | VPN | | | | | | | | | | CITRIX | | | | | | | |
| **Additional Drive Access** | | | | | | | | | | | | | | | | | | | | | | | | | Drive Name: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **WEB** | | | ENVIRONMENT: | | | | | | | | | | | | |  | | | | | | | | DVLP | | | | | | | | | | | | TEST | | | | | | | | | | | | | | PROD | | | | |
| Server(s): |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Groups: | | | | | | | | |  | | | | | | | | | | | |
| Web Portal Apps: (Specify Role) | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **UNIX** | | RMKC00a | | | | | | | RMKC00b | | | | | | | | | | RMDR00c | | | | | | | | | KCSUN204 | | | | | | | | | | RMDR00a | | | | | | | | OTHER | | | | | | | | | |
| Group(s): | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| File Directory(s): | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DATABASE** | | | List Server(s): | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ENVIRONMENT:** List Databases or Applications below – Specify access for DB {connect, resource, dba} Objects {role, table, synonym, procedure, function}  Permission {read, update, select, delete, execute}. Check “other” for Synergy Access and specify role in details section. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PROD | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DVLP | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TEST | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OTHER | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NFC** | | | | | USERID: | | | | | |  | | | | | | | | | | POI Code(s): | | | | | | |  | | | | | | | | | ORG: | | | | |  | | | | | | | Agency:  FA  CE | | | | | |
| Sensitive | | | | | Non-sensitive | | | | | | | | | | | | | | | | Inquiry | | | | | | Update | | | | | | | | | | Entry | | | | | | | | Certify/Approve | | | | | | | | | |
| **Other NFC Access Codes:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **TRAVEL** | | | | | OON: | | |  | | | | | | | | | | ORG: | | | | |  | | | | | | | | | | | RELEASE AUTHORITY | | | | | | | | | | | | | | | RELEASE VOUCHER | | | | | |
| **STARWEB** | | | | | TIMEKEEPER/TRANSMIT | | | | | | | | | | | | | | | | | ADMIN | | | | | | | | | SPECIFY CONTACT POINT: | | | | | | | | | | | |  | | | | | | | | | | | |
| **REPORTING CENTER** | | | | | | | | | **TUMS** | | | | | | | | | | | | | DETAILS & SENSITIVE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ADMIN | | | | | | | | | LEAVE ERROR | | | | | | | | | | | | | | | FINANCIAL | | | | | | | | | | | | | PERSONNEL | | | | | | | | | | | WORKFORCE | | | | | | |
| **FFIS:** | |  | | | | | | | **FDW:**   Basic  Payroll | | | | | | | | | | | | | | | | | | | | | | | | | *MITS, IAS, HEAT, CPAIS, ACRWS, Complete AD-1143* | | | | | | | | | | | | | | | | | | | | |
| **NITC** (Mainframe) | | | | | | | | | TSOC | | | | | | | | | | | | | | | | IDMS DATABASE | | | | | | | | | | | | | | | | OTHER: | | | | | | | | | | | | | |
| **OTHER (List/Explain):** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SIGNATURE OF EMPLOYEE: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DATE: | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
| SYSTEM/APPLICATION ADMINISTRATOR: (PRINT AND SIGN) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DATE: | | | | | | | | | | |
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| MANAGEMENT REVIEW/APPROVAL: (PRINT AND SIGN) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DATE: | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
| SECURITY STAFF: (PRINT AND SIGN) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | DATE: | | | | | | | | | | |
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