DEPARTMENT OF HEALTH & MENTAL HYGIENE MAINFRAME ACF2 LOGON MAINTENANCE REQUEST

INSTRUCTIONS: Section I. - Please provide LOGONID and the information requested. Check the appropriate box for the appropriate action – <u>Create</u> - Requests creation of new employee LOGONID; <u>Change</u> – Makes modifications to existing settings, and or permissions and privileges; <u>Delete</u> – Permanently deletes the LOGONID and removes <u>ALL employee access</u>, and/or permissions and privileges. Section II. – Place an X next to the privileges requested. Comments can be included as well as attachments. Please check the box below these instructions if you have <u>physically or electronically attached</u> additional information. Section III.- List the transaction codes for which access is needed and enter the appropriate letter in the respective column to show what level of access is authorized – see example at top of table. Log =L; Allow=A; and Prevent=P. Section IV- List the data sets for which access is needed and enter the appropriate letter in the respective column to show what level of access is authorized – see example at top of table. Log=L; Allow=A; and Prevent=P. If file is designated as "critical" (Protected health information (PHI), a social security number, a vital record, or financial data if <u>altered or exploited</u> could result in financial loss to an individual or the State) place a in the appropriate column.

All signatures on this form must be in <u>blue ink</u> by: the requesting Security Monitor, a manager with authority to
grant such access to the data or system, the manager's Division Chief or Director, and the DHMH Security
Officer.

PAPER ATTACHMENT INCLUDED []	ATTACHMENT SENT VIA I	EMAIL[]
SECTION I. CREATE LOGONID: ADMINISTRATION: LAST NAME: FIRST NAME, MI: TELEPHONE: ()	DELETE	SECURITY OFFICER USE [] COMPLETED Date// Initial One-time Password
SECTION II.		SECURITY OFFICER USE [] COMPLETED
CICS	BATCH JOBS	Date/
TESTCICS	DIAL-UP	
TSO	FILE TRANSFER	
COMMENTS: Please include all additional and format). Note: Requests for acceding John Doe to this new employee") cannot listed.	ss based on other employee profil not be accepted. All screen and d	es (e.g. "Give same access as ata-set details must be fully
(see other si	ide for additional informatio	on)

SECTION III. LIST TRANSACTIONS/ SCREENS (CICS): Enter the appropriate letter (Log = L;

Allow=A; Prevent=P) in the respective column to show what level of access is authorized – see example at top of table below.

Transcode/Screen	INQUIRE ONLY	ADD	DELETE	UPDATE
HXXX (Example)	L	P	A	A

SECTION IV. LIST DATA SETS NEEDED: Enter the appropriate letter (Log = L; Allow=A; and Prevent=P in the respective column to show what level of access is authorized – see example at top of table below. Enter ✓ to indicate "Critical File." NOTE: All Critical File access MUST be set to Log (L)

Data set	(√) If	READ	WRITE	ALLOCATE	EXECUTE
	Critical File				
HXXX.FILE.NAME (Example)	✓	L	L	L	L

APPROVAL SIGNATURES (must be in blue ink)

Requesting Security Monitor	Date//	Division Chief/Director	Date//
Manager responsible for		DHMH	
system or data*	Date / /	Security Officer	Date / /

To facilitate compliance, a copy of this form may be sent via email, but a signed original must be provided within 3 business days.

^{*}(DHMH SECURITY OFFICER WILL VERIFY, IF NECESSARY, APPROVING MANAGER AUTHORITY TO GRANT THIS ACCESS)