

REQUEST FOR ACCESS TO NFC'S TRAVEL SYSTEM

The information provided on this form will be used to establish or amend the user ID and access rights for the employee listed below for the appropriate system. Please fax the completed form to Security Officer, Travel Services Center, on (301) 734-5972. The designated employee and the approving official will be notified via e-mail when access has been established.

OnLine Travel System - TRVL		<i>(Check one or all that apply)</i>			
		Inquiry	Entry	Release Authority Requested	
				YES NO	
1. EMPLOYEE'S NAME (Last, First, Mi)		2. EMPLOYEE'S SOCIAL SECURITY NUMBER		3. EMPLOYEE'S PHONE NUMBER	
4. EMPLOYEE'S POSITION TITLE		5. IF CURRENTLY USING AN NFC SYSTEM, SHOW USER ID AP _____		6. ORGANIZATIONAL STRUCTURE CODE AGENCY _____ PROGRAM _____ REGION _____	
7. PROGRAM OFFICE MAILING ADDRESS <i>(Include Zip Code)</i>					

8. IF REQUESTING ACCESS TO THE ONLINE TRAVEL SYSTEM, RECORD THE ORIGINATING OFFICE NUMBER (OON) TO BE USED.

AGENCY **AG** AGENCY CODE **34** PROGRAM _____ REGION _____ UNIT _____

9. PROGRAM CONCURRENCE /CERTIFICATION:

I have reviewed the need for system access for the employee identified above. I certify that access to the system is necessary for the employee to perform the assigned functions. The employee will be provided information on his/her responsibility to maintain security of information obtained from the system.

SIGNATURE OF APPROVING OFFICIAL	PHONE NUMBER OF APPROVING OFFICIAL
NAME AND TITLE OF APPROVING OFFICIAL <i>(Please print)</i>	DATE APPROVED