

Shaded Boxes for US Postal Service use Only

Original PS 1357-S Located at:

U.S. Postal Service

Logon ID Assigned

Request for Computer Access

(Instructions for completing form on reverse side.)

Section A: User Identification

1. Requestor's Name	2. eAccess Unique ID or Last 4 Digits of SSN	3. Area N/A	4. Finance No. N/A
5. Requestor's Job Title	6. Employment Status (<i>Check one</i>) <input type="checkbox"/> Contractor <input type="checkbox"/> Career <input type="checkbox"/> Casual <input type="checkbox"/> Foreign	<input type="checkbox"/> Temporary	<input checked="" type="checkbox"/> Nonpostal
7. USPS Organization/Department N/A	8. USPS or Company Mailing Address (Include ZIP+4)		
9. Telephone No.			
10. District Code and Name N/A			

11. User Responsibility Agreement Statement
 I am responsible for Logon/Logoff, all actions pertaining to the use of my assigned logon ID, and will not provide my logon ID to another person. I agree that access to computer data or files not authorized to me is prohibited. I understand my logon ID may be suspended indefinitely if I violate security procedures or fail to provide update information for Section A whenever I change job positions. I agree that misuse of a USPS computer system may result in disciplinary action and/or criminal prosecution. I understand that any detected misuse of a computer system will be reported to the Inspection Service.
 (Read Privacy Act Statement on reverse side before signing. Note: Privacy Act Statement **MUST** be on reverse side of this form.)

Signature _____ Date _____

12. Manager Responsibility Agreement Statement

I agree that modifications to existing service agreements will require additional PS Form 1357 requests. I agree that this logon ID will be used for authorized USPS work within the scope of my organization. I also agree that upon termination or transfer of the user, I will advise the Computer Systems Security Officer in writing as to the disposition of the computer files and/or data and logon ID. I will periodically review the use of the assigned logon ID and computer files and/or data.

USPS Manager's Name (Please print) _____ Logon ID _____ Signature _____ Date _____ Telephone No. _____

Section B: Computer Access Requested

13a. Describe Support Required

Logon ID (Circle one): New Change Delete
 DDE/DR: Access Code: _____ User Type: _____

Facility Where Access Is Required: Eagan Data Center
San Mateo Data Center
 List Existing Logon IDs & Facilities: _____

Access for Delivery Confirmation System <input type="checkbox"/> PPP Dial-up Account Access to: PTSMFTP.USPS.GOV <input type="checkbox"/> Internet Access	Access for Confirm System <input type="checkbox"/> Web Site Access <input type="checkbox"/> File Transmission Account
Access for Entry Information System <input type="checkbox"/> Web Site Access <input type="checkbox"/> File Transmission Account	Access for Performance Reporting System <input type="checkbox"/> Web Site Access

13b. Resource Name (Additional room is available on the reverse side)	13c. Sensitive or Proprietary	13d. Access Level Required (See instructions)

Section C: Computer Access Approvals

14. Contractor Information (Must be completed by the Contracting Officer's Representative (COR))

a. Does the Contract Contain Provisions for (Circle Yes or No):
 1. Screening? Yes No
 2. Security of Information? Yes No
 3. Privacy of Information? Yes No
 4. Contractor Screening by the Inspection Service? Yes No

b. Contract Number: _____
 c. Contract Expiration Date: _____
 d. USPS Organization/Department: _____

15. USPS COR's Name (Please Print)	Signature	Date	Telephone No.
16. Functional System Coordinator's Name (Please Print)	Signature	Date	Telephone No.
17. Logon ID Administrator's Name (Please Print)	Signature	Date	Telephone No.

Instructions for Completing PS Form 1357-S

Note: Please print all entries except for signatures. Incomplete information may cause delays in implementation or return of this form.

Section A: User Identification

1. Print your full name.
2. Enter your eAccess Unique Identifier or last 4 digits of Social Security Number.
3. Enter your Area.
4. Enter your Finance Number.
5. Enter your official job title.
6. Enter your employment status.
7. Specify your work organization.
8. Enter your USPS or company mailing address (include ZIP+4).
9. Enter your telephone number.
10. Enter your District Code and District Name, if applicable.
11. Read and understand the User Responsibility Agreement Statement * and Privacy Act Statement (printed below) before signing and dating this document.
12. Your USPS manager must read and understand the Manager Responsibility Agreement Statement * prior to affixing his/her name, Logon ID (Unique Identifier), signature, date, and phone number.

Section B: Computer Access Requested

13a. Please check, circle, and describe the support that you will require. Specify any system compilers or other special software required in support of your request. Include all data access (CICS transaction IDs, IDMS codes, etc.) requirements or any special security required of the system or data. Include any support services (data entry, etc.) needed. Estimate the number of service hours required per week in support of your request. Special access request to the DDE/DR system will require DDE/DR Functional System Coordinator to supply the access code and user type.

13b. Enter the name of the application(s) or resources to which access is sought.

13c. Specify if applications or files within applications are sensitive or proprietary.

13d. Specify the appropriate access level to applications and files.

READ access allows a user to read and copy, but not to change a filename or it's contents.

WRITE access allows a user to change the contents of or delete a file, to create files within a catalog or directory, and may permit renaming and relocating files.

EXECUTE access allows a user to execute or use a program file, but generally not to see or change it.

ALLOCATE access allows a user to delete, rename, catalog, uncatalog, or archive a file.

Section C: Computer Access Approvals

14a-d. The Contracting Officer's Representative (COR) will complete this block -- reference the Administrative Support Manual (ASM); Procurement Manual (PM); and Handbook AS-805. If the contractor has not been screened, the contractor must complete and attach PS Forms 2025 and 2181 with this request.

15. The COR will complete Block 14 before entering his/her name, signature, date, and phone number.

16. To approve grants of access, the Functional System Coordinator enters his/her name, signature, date, and phone number.

17. The person (Logon ID Administrator) responsible for creating a logon ID for a user enters his/her name, signature, phone number, and date. The Logon ID Administrator must also indicate in the upper left hand corner of PS Form 1357-S where the original of this PS Form 1357-S will be kept and in the upper right hand corner the Logon ID assigned.

* Additional responsibilities can be found in Handbook AS-805 and Administrative Support Manual (ASM).

Privacy Act Statement

The collection of this information is authorized by 39 U.S.C. 401 and Public Law 100-235, Computer Security Act of 1987. This information will be used to assign computer logon IDs by which access to data and/or files on computer systems is limited to authorized persons through the use of computer security access control products. As a routine use, this information may be disclosed to a congressional office at your request; to OMB for review of private relief legislation; to a labor organization as required by the NLRA; where pertinent, in a legal proceeding to which the USPS is a party; to an appropriate law enforcement agency for investigative or prosecutorial purposes; to a government agency where relevant to a hiring, contracting, or licensing decision by the requesting agency; to a government agency in order to elicit information relevant to a hiring, contracting, or licensing decision by the USPS; to an expert or consultant under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Equal Employment Opportunity Commission for investigating a formal EEO complaint filed against the USPS under 29 CFR 1613; and to the Merit Systems Protection Board or Offices of Special Counsel for proceedings involving possible prohibited personnel practices. Completion of this form is voluntary; however, if this information is not provided, you may not be granted a computer logon ID.

13b. Resource Name (Continued from front)	13c. Sensitive or Proprietary	13d. Access Level Required (See instructions)