

**CORPORATE SYSTEMS ACCESS REQUEST FORM**

1. SYSTEM/APPLICATION NAME  
 Check one or more and complete the applicable section(s)
- Automated Cash Reconciliation Worksheet System
  - Corporate Property Automated Information System
  - Financial Data Warehouse
  - Foundation Financial Information System
  - GovTrip.com
  - Integrated Acquisition System
  - Management Initiatives Tracking System

2. FFIS APPLICATION NUMBER(S) (If Applicable)

**USER INFORMATION (See Privacy Act Statement)**

3. USER'S SSN (See Instructions)	4. USER'S NAME (Last, first, middle initial)	5. USER'S TITLE OR CONTRACTOR*
6. USER'S MAILING ADDRESS WITH ZIP CODE		7. AGENCY
8. OFFICE		
9. USER'S E-MAIL ADDRESS	10. USER'S PHONE NUMBER ( ) - -	11. MANAGER'S PHONE NUMBER ( ) - -

\*See special instructions

**ACTION REQUESTED**

<b>NAME CHANGE</b>	12. OLD NAME (Last, first, middle initial)	13. NEW NAME (Last, first, middle initial)
<b>ACCESS</b>	14. (Check all that apply): <input type="checkbox"/> Add User <input type="checkbox"/> Delete User <input type="checkbox"/> Modify User Profile <input type="checkbox"/> Agency Cross-Service Access	15. USER ID(S) (Include NFC, FFIS, E-Auth User ID, if applicable)

**AUTOMATED CASH RECONCILIATION WORKSHEET SYSTEM (ACRWS) ACCESS**

**16. USER'S ACRWS 52 Roles/Access**  
(Check all that apply)

		Approver	Auditor	Browse	Import	ImportMGR
12060000	FSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12250001	AMS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12370001	FSIS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400002	DASO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400300	ARS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400303	OSEC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400401	OES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400402	OCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400403	NAD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400404	OBPA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400405	HS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400406	OCFO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400407	OCIO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400505	DA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400606	OC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400700	RD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400707	OASCR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12400800	RMA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12401000	FAS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12401010	OGC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12401100	FS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12401240	USDA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12401600	NRCS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12401800	ERS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12402000	NASS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12402200	CSREES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12402300	OIG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12403000	FNS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12403400	APHIS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12403600	GIPSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12407878	OAO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ACRWS 52 BRIO/Hyperion

**17. USER'S ACRWS 53 Roles/Access**  
(Check all that apply)

- Browse
- Auditor
- Approver
- Import Manager
- Import
- Match Admin
- ACRWS 53 BRIO/Hyperion

**CORPORATE PROPERTY AUTOMATED INFORMATION SYSTEM (CPAIS) ACCESS**

**19. USER'S CPAIS ROLE**

**UMA ROLES**

- UMA Manager Real
- UMA User Real  
( Specify add and/or modify role(s))

**RPA ROLES**

- RPA Stream Manager
- RPA Disposal Manager
- RPA Local Manager

**RPM ROLES**

- RPM Lease Manager
- RPM Property Manager
- RPM Work Item Manager
- RPM Occupancy Manager
- RPM Colocation Manager

**GENERAL ROLES**

- Contact Manager
- CPAIS Read Only
- FRPP Administrative Manager
- RP Security Officer

**SUPER USER ROLES**

- CPAIS Administrative Manager
- CPAIS Headquarters Manager

**21. SIGNATURE OF UMA Manager for all Users. (Sign and date)**

**FINANCIAL DATA WAREHOUSE (FDW) ACCESS**

**25. USER'S SECURITY GROUP**

- Payroll             Security
- Non-Payroll

**26. USER'S SECURITY ACCESS**

- Analyze and Process (Quick view)
- Query and Analyze (Insight)
- Data model and Analyze (Explorer)

**INTEGRATED ACQUISITION SYSTEM (IAS) ACCESS**

<b>28. USER'S IAS ROLE (Check all that apply)</b> <input type="checkbox"/> Requisitioner <input type="checkbox"/> Requisition Approver <input type="checkbox"/> Budget Approver <input type="checkbox"/> Commitment Error Manager <input type="checkbox"/> Purchasing Specialist/Contracting Officer <input type="checkbox"/> Supervisory Contracting Officer <input type="checkbox"/> Obligation Error Manager	<input type="checkbox"/> Receiver <input type="checkbox"/> Invoice Entry Clerk <input type="checkbox"/> Payment Approving Officer <input type="checkbox"/> Payment Approving Error Manager <input type="checkbox"/> Interface Manager <input type="checkbox"/> Payment Status Reviewer <input type="checkbox"/> Other _____	<b>29. REQUISITION APPROVAL AMOUNT</b>  
		<b>30. ACQUISITION WARRANT AMOUNT</b>  
		<b>31. CROSS AGENCY SERVICE TO (If Applicable)</b>  

**MANAGEMENT INITIATIVES TRACKING SYSTEM (MITS) ACCESS**

<b>32. PMA ROLES (Check one)</b> <input type="checkbox"/> Agency User <input type="checkbox"/> Approving Official <input type="checkbox"/> Initiative Owner <input type="checkbox"/> Executive Officer <input type="checkbox"/> PMA Coordinator  PMA Initiative(s): _____ _____ Agency(s): _____	<b>PART ROLES (Check one)</b> <input type="checkbox"/> Agency User <input type="checkbox"/> Approving Official <input type="checkbox"/> Mission Area Coordinator <input type="checkbox"/> Executive Officer <input type="checkbox"/> OBPA Officer  PART Program(s): _____ (Optional) _____ Agency(s): _____  Mission Area(s): _____ (Required for Mission Area Coordinator only)	<b>BUDGET ROLES (Check one)</b> <input type="checkbox"/> Agency User <input type="checkbox"/> Approving Official <input type="checkbox"/> Executive Officer <input type="checkbox"/> OBPA Coordinator  Agency(s): _____
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**MANAGEMENT INITIATIVES TRACKING SYSTEM (MITS) ACCESS**

<b>AUDIT TRACKING (Check one)</b> <input type="checkbox"/> Agency User <input type="checkbox"/> Executive Officer and OIG Auditors <input type="checkbox"/> Audit Follow-up Coordinator  Agency(s): _____ Mission Area(s): _____	<b>SUSTAINABILITY SCORECARD ROLES (Check one)</b> <input type="checkbox"/> Agency User <input type="checkbox"/> Approving Official <input type="checkbox"/> Initiative Owner <input type="checkbox"/> Executive Officer <input type="checkbox"/> SSM Coordinator  SSM Initiative(s): _____ _____ Agency(s) : _____	
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**GOVTRIP.COM**

<b>33. GovTrip.com Role</b> <input type="checkbox"/> Traveler <input type="checkbox"/> Travel Arranger <input type="checkbox"/> Approver <input type="checkbox"/> Agency FATA	<b>34. GovTrip TRAINING RECEIVED?</b> (If yes, enter date completed) <input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____	<b>35. GovTrip Agency APPROVER</b> (Sign and date when action has been completed) Approver: _____ Date: _____
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**SPECIAL INSTRUCTIONS**

36. SPECIAL INSTRUCTIONS

**USER ACKNOWLEDGEMENT**

*I have read the automated information systems security rules and understand the security requirements of the automated information systems and/or applications described on this form. I understand that any violation of these rules may result in disciplinary action, removal from the agency/USDA, and/or criminal prosecution.*

37. USER'S SIGNATURE

38. DATE

**BACKGROUND INVESTIGATION**

39.

40. DATE (*Initiated or completed*)

41. PRINT MANAGER'S NAME

- Initiated
- Completed

**AUTHORIZATION**

**User's Manager** – *I certify this user has received security instructions for the systems and/or applications indicated, and I approve his/her access to these systems and/or applications and the associated user profiles.*

42. MANAGER'S SIGNATURE

43. DATE

**ACTION TAKEN**

44. SECURITY ADMINISTRATOR

45. DATE

46. SECURITY ADMINISTRATOR NOTES

**PRIVACY ACT NOTICE**

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of your Social Security Number is authorized by Executive Order 9397 of November 22, 1943 and 5 U.S.C. 301. The primary purpose of requesting the Social Security Number (SSN) is to properly identify the employee. Many employees have similar names and the furnishing of the SSN will enable USDA to identify authorized users of USDA's computer systems. The information will be used by offices and employees who have a need for the information in the performance of their official duties. The information will not be disclosed outside USDA. Disclosure of your SSN and other information is mandatory. Failure to provide the requested information will result in the denial of the requested computer access authority.

**CORPORATE SYSTEMS ACCESS REQUEST FORM RULES OF BEHAVIOR**

In compliance with Federal Regulations and Departmental Policy, all users complete an Annual Computer Security and Awareness and Rules of Behavior Training in AgLearn.

# AD-1143 FORM INSTRUCTIONS

## **BLOCK NO.**

- 1 Check one or more systems. Fill in information for access in Special Instructions for FedTraveler.com  
2 Enter the agency FFIS application number, i.e., FF34 for APHIS, or FF11 for Forest Service.

## **USER INFORMATION**

- 3 Enter social security number. **The Social Security Number is only required for adding a user to a FFIS application for the first time.**  
4 Enter name.  
5 Enter job title or Contractor, if not a USDA employee.  
6 Enter address where the user can be contacted by mail.  
7 Enter agency name and agency code/number.  
8 Enter office, i.e., Financial Management, Procurement Operations.  
9 Enter e-mail address.  
10 Enter telephone number.  
11 Enter manager's telephone number.

## **ACTION REQUESTED**

- 12 Enter "old" name, when requesting a name change.  
13 Enter "new" name, when requesting a name change.  
14 Check the appropriate action to be taken. If requesting a modification to your profile, specify in Block 29 the previous profile or job assignment and the new profile or job assignment. If the user performs services for additional USDA agencies, e.g., "cross-servicing, specify the additional agencies(s) and required roles.  
15 Enter NFC, FFIS, E-Auth, userid AND if Block 14 is "delete user" or "modify user", include existing userid. If action requested in Block 14 is "add user", the Agency Security Administrator will assign the userid.

## **AUTOMATED CASH RECONCILIATION WORKSHEET SYSTEM ACCESS**

- 16 Check appropriate Role(s)/Access for ACRWS52. More than one box can be checked.  
17 Check appropriate Role(s)/Access for ACRWS53. More than one box can be checked.  
18 Reserved.

## **CORPORATE PROPERTY AUTOMATED INFORMATION SYSTEM ACCESS**

- 19 Check the appropriate action to be taken. If requesting a modification of your user CPAIS role, specify all role(s) deleted and/or added.  
21 If requesting UMA manager, this must be approved at a department level.

## **FINANCIAL DATA WAREHOUSE SYSTEM ACCESS**

- 25 Check the appropriate box to grant level of access. Security group is for Security Administrators or individuals who need access per job duties.  
26 Check the appropriate box to grant level of report access. Check only one box.  
27 Reserved

## **INTEGRATED ACQUISITION SYSTEM ACCESS**

- 28 Check all appropriate roles.  
29 Enter requisition approval amount, if user is a Funds Approver.  
30 Enter warrant amount, if user is a Contracting Officer. Verify the amount to be entered here with your supervisor if you are warranted for a higher amount than your supervisor has authorized you for.  
31 Does this user purchase for other agencies? If yes, enter the agencies here, e.g., Rural Development, Food and Nutrition Service.

## **MANAGEMENT INITIATIVES TRACKING SYSTEM ACCESS**

- 3 Not required.  
15 Enter eAuthorization User ID.  
32 Check required role.  
See USDA Corporate Website or the MITS Security Features User's Guide for definitions of each role. Only one role per MITS module should be entered on an individual AD-1143; complete separate AD-1143 documents for each additional role.

For PMA: Enter appropriate initiative(s).  
HC – Human Capital CS – Competitive Sourcing  
RP – Real Property CP – Credit Programs  
FM – Financial Management eGov – Egovernment  
FBCI – Faith Based R&D – Research and Development  
IPIA – Improper Payments BPI – Budget and Performance Integration

For PART: Enter appropriate agency(s).  
Enter appropriate program(s) or "ALL", default is "ALL".  
Enter appropriate agency(s).  
Enter mission area(s) (required for mission area coordinators only).  
Enter PART program(s) – optional (enter if user should have edit access for limited PARTs)

For BUDGET: Enter appropriate agency(s).

For AUDIT TRACKING: Enter appropriate agency(s).  
Enter mission area(s) (required for mission area coordinators only).  
Executive Officer and OIG Auditors role – Available to OCFO employees and OIG auditors only.  
Audit Follow-up Coordinator role – Available to OCFO employees only.

For Sustainability Scorecard: Enter appropriate initiative(s).  
Enter appropriate agency(s).

**GOVTRIP.COM**

33 Please check the role the user will be in GovTrip.

**Traveler** – Only view their travel data and submit their own voucher for approval.

**Travel Arranger** – Able to prepare travel plans for designated personnel in their agency's organization and able to see the information of others.

**Approver**—Able to approve travel vouchers for designated personnel in their agency's organization.

**Agency FATA** – Able to set up configuration for their designated agency. This should be only a few personnel.

34 Indicate if training has been received.

35 Signature of the requester's supervisor or designated travel manager in the agency.

**SPECIAL INSTRUCTIONS**

36 Include any additional information needed to complete access. Specify the security profile or job assignment, or any comments or special instructions.

For CPAIS: Provide organization number(s) for which access is being requested. If access is needed for all organizations within an agency, list agency name and "ALL".

For FFIS: 1) Provide previous profile or job assignment and the new profile or job assignment, if modification to existing model; and  
2) Provide the names of the additional agencies(s) and required roles, if the user performs services for additional USDA agencies, e.g., "cross-servicing".

**USER ACKNOWLEDGEMENT**

**A USER SIGNATURE IS REQUIRED IN THE USER ACKNOWLEDGMENT BLOCK WHEN THEY ARE ADDED TO A SYSTEM.**

37 User's signature.

38 Date user signed form.

**BACKGROUND INVESTIGATION**

**THIS FIELD MUST BE FILLED OUT. SECURITY ADMINISTRATORS WILL NOT COMPLETE THE REQUEST UNLESS THIS BOX IS FILLED OUT ACCORDING TO THE INSTRUCTIONS BELOW**

39 Check whether background investigation has been initiated or completed. This applies to both USDA employees and contractors.

40 Date background investigation was initiated or completed.

41 Name of user's immediate manager

**AUTHORIZATION**

42 Manager's signature.

43 Date manager approved the requested action.

**ACTION TAKEN**

44 Security Administrator's signature.

45 Date Security Administrator completed user's request.

46 Security Administrator can use this space to include any notes related to the completion of the request. The agency's Security Administrator will retain each completed form for audit purposes.