

NATIONAL FINANCE CENTER AGENCY DISTRIBUTED SECURITY ADMINISTRATOR DESIGNATION FORM

Please complete one form for each security administrator

DEPARTMENT	AGENCY		
SUB-AGENCY	EFFECTIVE DATE: <i>(Date designated as a security officer if known, if not, list current)</i>	DISTRIBUTED SECURITY ADMINISTRATOR <input type="checkbox"/> webTA <input type="checkbox"/> EmpowHR	
DISTRIBUTED SECURITY ADMINISTRATOR NAME	PHONE	EMAIL	
CHIEF INFORMATION SECURITY OFFICER NAME	PHONE	EMAIL	
CHIEF INFORMATION SECURITY OFFICER TITLE	CHIEF INFORMATION SECURITY OFFICER SIGNATURE		DATE
AMB USE ONLY			
REMEDY TICKET NUMBER	DATE		
APPLICATION NAME <input type="checkbox"/> webTA <input type="checkbox"/> EmpowHR	ADMINISTRATOR NAME		