webTA Access Request Form

General Information:

Complete this form **after** you have been granted an e-authentication ID and password.

Fill out this form to terminate current or request new timekeeper or new supervisor webTA access.

This form must be filled out completely and accurately to be accepted for processing.

You must use your computer to fill-out this form. Tab from field to field and use your mouse for drop-down menus. Print, sign and fax the completed form to your program's *Civilian Pay Technician at 612-336-3544. You can find information to identify your program's Civilian Pay Technician on this USDA-APHIS-HR-Leave and Compensation Team web page:*

http://www.aphis.usda.gov/mrpbs/contact_us/downloads/lct.pdf

A separate request must be completed for each user.

User Information:

Effective Pay Period: [   ]   Year: [   ]   Type of Request: [   ]

Last Name: [   ]   First Name: [   ]   MI: [   ]

Social Security Number (last four digits only): [   ]

Agency: [   ]   Program: [   ]   E-mail Address: [   ]

Office Address: [   ]

City: [   ]   State: [   ]   Zip: [   ]

T & A Contact Point Number: [   ]   Phone: [   ]   Fax: [   ]

Supervisor's Name: [   ]   Phone: [   ]

Role Type: [   ]   Access Type: [   ]

Authorization:

User Signature: _____   Date: [   ]

Supervisor Signature: _____   Date: [   ]

Supervisor signature indicates approval of the access requested by the user on this form.

Agency Review and Approval: (To Be Completed By HRO)

Approving Official

Name: [   ]   Phone: [   ]

Title: Civilian Pay Technician

Application Approved:

◯ **Yes**   ◯ **No**

(State Reason For Disapproval)

Signature: _____   Date: [   ]

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