



HUMAN RESOURCES REPORT LIBRARY AUTOMATED SYSTEM (RLAS) INFORMATION REQUEST FORM

INSTRUCTIONS:

- * Please complete the form and save to your computer.
- * Email the form to your supervisor for review and confirmation that you are allowed to have access to the RLAS.
- * Your supervisor must then email the form directly to abbasish@uhnj.org

Requestor (All fields are mandatory)			
Name:	<input type="text"/>	UH ID:	<input type="text"/>
Title:	<input type="text"/>	Department:	<input type="text"/>
Email:	<input type="text"/>	Phone/Ext.:	<input type="text"/>
		Request Date:	<input type="text"/>
Requestor's Supervisor (All fields are mandatory)			
Name:	<input type="text"/>	Title:	<input type="text"/>
Email:	<input type="text"/>	Phone/Ext.:	<input type="text"/>

Requested Data Points:			
<input type="checkbox"/> UH ID	<input type="checkbox"/> Position Title	<input type="checkbox"/> FTE	<input type="checkbox"/> Hourly Rate
<input type="checkbox"/> Last Name	<input type="checkbox"/> Department	<input type="checkbox"/> Hire Date	<input type="checkbox"/> Termination Date
<input type="checkbox"/> First Name	<input type="checkbox"/> Campus	<input type="checkbox"/> Salary	<input type="checkbox"/> Organizational Codes
Please specify any other data points and list your department's Organizational Codes. (eg.: ZR9999, ZS0001...)			
<input type="text"/>			

Justification:
Please explain how your business process is dependent upon the requested information.
<input type="text"/>