



## Security Request Form

Please fill out the following form for **each** security role you wish to have created or modified. A Support team member will contact you once the role is complete or if further details are needed.

Contact Name & Phone Number: \_\_\_\_\_

Company IDs or Company Set IDs this role need access for: \_\_\_\_\_

Name of the New/Existing Security Role: \_\_\_\_\_

Please provide a short description of the main functions for this role (if new role):

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Will this role be applied to an existing employee in Web Pay?    YES    NO

Access for social security numbers?    Full Access    Masked    View Only    None

Access for dates of birth?    Full Access    Masked    View Only    None

Should this role have access to the Reports Library and Report Writer?    Library    Writer    None

Please select rights this role should have access to:

	Full Access	View Only	None (Hide)
Company:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Earnings/Deductions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Departments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agency Checks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Company tabs/screen to hide: \_\_\_\_\_

Payroll:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Start/Key Payroll Batches	<input type="checkbox"/>		<input type="checkbox"/>
Approve Payroll	<input type="checkbox"/>		<input type="checkbox"/>
Submit Payroll	<input type="checkbox"/>		<input type="checkbox"/>
Employee Info:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Earnings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deductions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Salary/Rates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Direct Deposit Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pay/Check History	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Info tabs/screens to hide: \_\_\_\_\_

Human Resources: <i>(if applicable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time-Off Balances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other HR tabs/screens to hide: \_\_\_\_\_

Will they need access to employee's information who report directly to them?    YES    NO

Are there any specific departments this role should NOT have access to?

Please List: \_\_\_\_\_

Are there any specific employees this role should NOT have access to?

Please List: \_\_\_\_\_

Please fax the completed form to 847-956-1926 or email to: [service@paylocity.com](mailto:service@paylocity.com)