

**Minnesota Department of Employment and Economic Development**

**DEED Reporting Services For Report Access and Change Request Form #2010**

Request forms must be filled out Online, then printed and signed. No handwritten copies of the form will be accepted. Please make sure spelling is correct. The red flags indicate Electronic Signatures are accepted. Once you have completed 1 - 13, your supervisor then signs and forwards this form to MN.IT Service Desk for processing.

**E-mail the completed form to the MNIT Service Desk On/Off Board Team at [mnit.enterprise.sd.onoffboard@state.mn.us](mailto:mnit.enterprise.sd.onoffboard@state.mn.us)**

When the access/change request process has been completed, the requester and manager will be notified via email. For additional assistance in completing this form, contact your immediate supervisor.

**(1) Requestor Information**

2) Last Name		3) First Name		4) MI	
5) Phone #		6) Alt Phone #			
(7) Requestor's Business/Agency/Dept. Name					
8 Email Address					
9 Job Title		10) Are you a State Employee or Partner Employee? <b>State</b> <b>Partner</b>			
11) Do you have a Reporting Services account; if so, what is your assigned User Name?					

**(12) Select which Report Groups you are requesting access**

<b>WDD General</b>	CRS-MNWORKS	WOTC	Rapid Response		
<b>Rehab Services</b>	Caseload Mgmt	Admin	Case Review	EE	
<b>SSB</b>	Caseload	SSA Verify			

**(13) Requester Terms and Conditions for Access**

I agree to the following terms and conditions for accessing DEED Reporting Services Reports. Access to Reporting Services data is restricted to use in performing official duties of my employment. The data obtained will not be used for personal reasons or purposes not related to the performance of my job duties. The Login ID and Passwords issued by DEED will not be shared with others. As an employee of the Department of Employment and Economic Development DEED OR its Partners. I understand that I am bound by the laws concerning the confidentiality of non - public data. The provisions for data privacy are contained in the Minnesota Government Data Practices Act, Minn. Stat. §13; Minn. Stat. §116J.401; and other applicable state statutes and federal laws. Willful violation of the data privacy laws may result in disciplinary action up to and including dismissal as well as civil damages. Willful unauthorized disclosure of data is a misdemeanor under Minnesota law.

Requestor Signature		Requesting Date (mm/dd/yyyy)	
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**(14) Manager Terms and Conditions for Access**

As the Manager/Supervisor of the above named Requestor, I am confirming the Requestors business need and rights for accessing this data, the information provide on the form is correct, and request that access be provided to the specific program reports as outlined.

Manager Name		Manager Phone #	
Manager Email Address			
Requesting Activation Date (mm/dd/yyyy)		De-Activation Date (mm/dd/yyyy)	
Manager Signature (required)		Date Signed (mm/dd/yyyy)	

**(15) Submitting the Form via Email to:**

MNIT Service Desk On/Off Board Team at [mnit.enterprise.sd.onoffboard@state.mn.us](mailto:mnit.enterprise.sd.onoffboard@state.mn.us).

**(16) DEED Data Practices Manager Authorization**

Request Approved? <b>Yes</b>	If Yes, Access Term/Renewal Date Required (mm/dd/yyyy)	
<b>No</b>	If No, Please state denial reason:	
DPMA Signature		Date Signed (mm/dd/yyyy)

**(17) MN.IT Services @ DEED**

Request Approved? <b>Yes</b> <b>No</b>	WF1 Account(s):			
MN.IT @ DEED Signature		Date Signed (mm/dd/yyyy)		

**Account Notes:**

	Notified Mgr/Requestor	Yes, Email Was Sent	Yes, Instructions provided to Requestor
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