

STATE OF WYOMING WOLFS ACCESS SECURITY MAINTENANCE

Indicate Action Desired:

- Establish New Access
 Change Existing User Profile
 Name Change
 Cancel All WOLFS Access

Section 1: User Profile

Employee's Name (First, Last – Same as SSN card)			Payroll Employee Id #, Vendor Name, or specify temp employee		Existing User ID (if applicable)
Employee Phone Number			Employee Email Address		
Agency Number	Agency Name	Home Unit	I request that this employee be assigned the WOLFS access indicated below		
_____			Agency Director or CFO Signature		Date

Section 2: WOLFS Security Profile

Item 1: Identify the document types, WOLFS access and capabilities the user should be assigned. (Place an X in the applicable boxes.)
 Item 2: Identify, if any, what work list the documents will be work flowed to once the document is submitted by the user. Or. should the document submit to final And not workflow to a work list for approvals? Specify the work list name the document should workflow to or write the word final.
 Item 3: Identify, if any, what work list(s) the user will have access to for approving documents. Specify the approval work list name.
Note* A User cannot approve their own documents if the user has access to the specified approval work list for item 3.

<input type="checkbox"/> Check to copy another Wolfs ID profile			If checked, please indicate the other user's name _____ and user's ID _____							
<input type="checkbox"/> Check to copy another Wolfs ID profile			If not checked please complete the section below							
DOC TYPE	TRANSACTION DESCRIPTION	WOLFS ACCESS		ACCESS CAPABILITIES				WORK FLOW		OTHER
		ALLOW	CANCEL	SCAN/ VIEW	ENTER DOCS	VALIDATE DOCS	SUBMIT DOCS	(Item 2) SUBMIT TO WORKLIST or FINAL	APPROVE DOCS (*)	(Item 3) APPROVAL WORKLIST
BGA120	Expense Budget	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BGR121	Revenue Budget	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RQS	Requisition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MPG	Price Agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MSC	Service Contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DO	Delivery Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GAE	Mass Encumbrance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PRC	Comm. Payment Request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
PRCRES	Comm. Payment Request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GAX	General Expenditure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GAXRES	General Expenditure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
IET	Internal Transaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GEM	Expenditure Mod.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RM	Revenue Mod.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JRM	Revenue Mod.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CR	Cash Receipt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CRL	Loan Cash Receipt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RE	Receivable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DC	Disb. Cancellation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
AD Cancel	Disb. Cancellation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MD Cancel	Man. Disb. Cancel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cost Accounting	CAS, CAM, BGPHE, BGPDE, BGPDR, BGPDR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CH	Charge Document	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fixed Assets	FA, FD, FM, FI, FX	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
JVA	Journal Voucher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A	<input type="checkbox"/>	<input type="checkbox"/>	SAO work list	N/A	N/A
VCC&VCM	Vendor Customer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SAO work list	N/A	N/A
WO	Write Off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Comments										

****Please note all WOLFS users will have access to infoAdvantage**

After completion of this form, forward to: State Auditor's Office or Fax: (307) 777-6983 or scan & email.
 WOLFS Security Suite E400, Herschler Bldg to address below
 Cheyenne, WY 82002

If you have questions please contact the WOLFS Help Desk: saowolfshelpdesk@wyo.gov (307) 777-5258

WOLFS User Responsibilities

The State Auditor’s WOLFS (Wyoming On-Line Financial System) access privileges to State employee information come with user responsibilities. Acceptance of these responsibilities is required for initial and continuing access to HRM. Please also be aware of the Statewide IT Policies and Standards, which can be found at <http://ets.wyo.gov/resources/policies-and-standards> 1200-P142 - User Responsibilities.

As a user of the WOLFS and/or infoAdvantage system(s), I agree to be responsible and accountable for my activities and shall not violate or act with others to violate security policies, procedures, rules, standards, and applicable State and federal laws or regulations.

I agree to be continuously aware that all credentials (e.g., the combination of WOLFS and info User IDs and passwords) that allow access to any State information, data, or system are explicitly the property of the State of Wyoming and only to be used for conducting official business.

I agree I am responsible to protect the credentials assigned to me by the State Auditor’s Office and shall not share these credentials with anyone else. If credentials are compromised, lost, or stolen, I shall immediately report this to the agency WOLFS Authorized Liaison and the State Auditor’s Office.

I shall abide by all procedures pertaining to information security, confidentiality, and privacy when handling information owned by or entrusted to the State, for example information about vendors, payroll deductions, salaries, social security numbers, bank account numbers, etc. I agree to respect others’ privacy when handling their personal information and shall take appropriate precautions to protect restricted information, especially when transmitted or received via computer networks and all other communication sources.

I will not disclose restricted State information entrusted to my safekeeping to anyone not authorized to receive such information.

Printed Name

User ID (WOLFS/InfoAdvantage ID)

Signature

Agency Number and Name

Date