Wyoming State Auditor's Office Agency
Interface Request Form

1. Agency Name:

2. Agency Interface Contact Information:

   Name:

   Phone:

   Email:

3. Are you requesting a new interface or a change to an existing interface?

   ☐ New interface ☐ Change to existing interface

4. If you are requesting a change to an existing interface, what is the interface number:

5. Are you submitting an agency interface request because you recently procured a new or different system? ☐ Yes ☐ No

   If yes, please provide the following:

   Name of the new system (or vendor):

   RFP number:

   Date a contract was signed with the system vendor:

6. Has ETS assigned a project manager to your project? ☐ Yes ☐ No

   If yes, who?

7. Who is the agency technical lead on the project?

8. Please briefly describe how your agency anticipates interfacing with WOLFS or HRM:

9. Briefly describe the data fields (or doc codes) that will be included in the interface:

10. What is your proposed interface processing schedule (daily, weekly, monthly)?

11. Who from your agency will be processing the interface once it is developed (ex. who will be uploading or downloading files through AdvantageConnect)?

12. By what date will interface development and testing need to be completed:

Please allow up to thirty (30) days for review and approval of your request and an additional thirty (30) days for interface development or changes (prior to testing).

For questions about this form, please contact SAOInterfaces@wyo.gov

For additional information about the interface development and testing process, click here: https://sao.wyo.gov/wolfs/interfaces/

Wyoming State Auditor's Office Agency Interface Request Review and Signature

Please have your agency director sign below:

I, _____, have reviewed the information provided on Wyoming State Auditor's Office Interface Request Form and support this interface request.

_____ _____

Agency Director Signature Date

☐ Circulated to Tricia Bach, Director, Wyoming Administration and Information

☐ Circulated to Jeff Clines, Director, Wyoming Enterprise Technology Services

Approved ☐ or ☐ Denied by Chad Auer, Wyoming State Auditor's Office

Date: _____

☐ Circulated to Wyoming State Auditor's Office Technology Division