

# Division of Information Technology

## NetID HR Identity Agent Designation Form



**Purpose:** This form is used to designate or disable access for HR Identity Agents. The employee who will fulfill the role must read the Statement of Responsibility below and sign along with the department head making the designation.

### Employee Information:

Full Name: \_\_\_\_\_

UIN: \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_

Texas A&M System Member Institution: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Mail Stop: \_\_\_\_\_

**Action:**       Enable Access       Remove Access      Effective Date: \_\_\_\_\_

### Texas A&M NetID Identity Management System Statement of Responsibility

I have read and understand that I will be violating System Policies and Regulations and State and Federal law if I gain or help others gain unauthorized access to any program/system to which I am granted access. I understand that the information I have access to view may be confidential in nature. I acknowledge that I will not use this information for non-System purposes or for purposes that are not within the responsibilities of my position description. I understand that if I reveal confidential information or use information in an inappropriate manner I may be subject to disciplinary action, up to and including termination and criminal prosecution to the full extent of the law (Texas Penal Code, Chapter 33).

I certify that I am a designated HR Liaison (if TAMU) or am authorized by the department head to perform HR functions (if not TAMU). I understand that I am required to attend in-classroom training before my access will be enabled.

Required Approvals	Name (Printed)	Signature	Date
Employee:			
HR Liaison Coordinator, if applicable:			
Department Head:			

Submit form to:  
**Division of Information Technology**  
**Identity & Access Management**  
 identity@tamu.edu

Need Help?  
**Division of Information Technology**  
**Identity & Access Management**  
 identity@tamu.edu