# Add a Person of Interest (POI) Worksheet

For individuals who do not have a job record with the CU system. Example: to track training for compliance purposes for an individual not paid by the University, or for security access to University systems. This form is designed to be utilized for entry into HCM by the sponsoring department. The data may be entered and signed electronically before printing.

**Affiliate**: Use this type for persons who have an affiliation with the university but are employed by another company
**External Instructors**: Use this type for external instructors who need a university ID but are not paid by the university
**Other**: All others, such as temporary agency employees, not paid by the university
**Pre-Employment:** Use this type for persons who will be future UCCS employees so they may receive access prior to actual hire (start) date
**Security**: Use this type for persons who need security access to a university system such as HCM, Finance, CIW (SSN required)
**Visiting Scholar**: Use this type for Visiting Scholars who need a university ID or parking but are not paid by the university
**Volunteer**: Use this type for persons who volunteer at the university but are not paid

Section one is to be completed by person of interest. Section two is to be completed by the department.

## SECTION ONE: RETURN COMPLETED FORM TO SPONSORING DEPARTMENT

| Today's Date: | | | Person ID/ Employee ID (If Applicable): | |
|---|---|---|---|---|
| | | | | |
| **First Name:** | | **Middle Name/Initial:** | **Last Name:** | **Previous Last Name:** |
| | | | | |
| **Date of Birth:** | **Gender:** | | **Prefix (Optional):** | **Suffix (Optional):** |
| | ○ Male ○ Female ○ Not Disclosed | | | |
| **Highest Educational Level (Optional):** | | | **Marital Status (Optional):** | |
| | | | | |

**SSN**- Required for security & pre-employment POI types (If you wish to provide verbally, please call your dept. contact):

| |
|---|
| |

**Address:**    ○ Home    ○ Mailing

| | | |
|---|---|---|
| | | |
| **City:** | **State:** | **Postal Code:** |

**Address 2 (Optional):**    ○ Home    ○ Mailing

| | | |
|---|---|---|
| | | |
| **City:** | **State:** | **Postal Code:** |

| **Primary Phone Type:** | **Phone Number:** |
|---|---|
| ○ Campus ○ Cell ○ Dorm ○ Emergency ○ Business ○ Home ○ Main | |
| **Additional Phone Type (Optional):** | **Phone Number:** |
| ○ Campus ○ Cell ○ Dorm ○ Emergency ○ Business ○ Home ○ Main | |
| **Primary Email Type:** | **Email Address:** |
| ○ Campus ○ Business ○ Dorm ○ Home | |
| **Additional Email Type (Optional):** | **Email Address:** |
| ○ Campus ○ Business ○ Dorm ○ Home | |
| **POI Signature:** | **Date:** |
| | |

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| First Name: | Middle Name/Initials: | Last Name: | Previous Last Name: |
|---|---|---|---|
|  |  |  |  |

| Effective Date (Date the relationship between the POI and CU becomes active): | | Person ID/ Employee ID: |
|---|---|---|
|  |  |  |

| POI Type 1: | POI Type 2: | POI Type 3: |
|---|---|---|
|  |  |  |

| Department Name: | Department #: |
|---|---|
|  |  |

| Planned Exit Date (Default, 1 year from date of entry): | More Information: |
|---|---|
|  |  |

| Sponsoring Department Name: | Sponsoring Department #: |
|---|---|
|  |  |

| Sponsor Name: | Sponsor EID: | Sponsor Position #: | Sponsor Phone #: |
|---|---|---|---|
|  |  |  |  |

| Sponsor's Signature: | Date: |
|---|---|
|  |  |

Most affiliates who are not physically on a CU campus or office use a VPN connection to their sponsoring campus' LAN to access university data and systems.  Special arrangements have been made for a few organizations, including Children's Hospital Colorado, National Jewish Hospital and NCAR.  Your sponsor will probably know the status for your location. Providing the name of your local IT contact will help resolve access problems, if necessary.

| Affiliated Organization Name: | |
|---|---|
|  |  |

| IT Contact in POI Organization: | IT Contact Phone: |
|---|---|
|  |  |

## NOTES FOR SPONSORING DEPARTMENT

- Use this form to enter the POI information into HCM and generate a Person ID.
- Click here for step-by-step guide to adding a POI.
- Inform the POI of his/her Person ID.
- The HCM ID must be on all Security Access Request forms before sending them to your campus security.
- Keep POI worksheet for department records. You do not need to send a copy to ES or UIS.
- A required "Official" email address is the official email for the university and, by policy, must be created by your campus IT department (not the affiliate department). After saving, contact your IT department and provide it with your new POI's Peron ID. The morning after the email has been created in the campus email directory, it will be loaded into HCM and other university systems.
- The creator of the POI will enter a planned exit date. This date can be extended as needed while the person is still an active affiliate of the university. The system defaults to a planned exit date that is one year from the date of entry. Access will not be granted until the POI is set up in HCM and all required trainings are verified.

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