

WORKDAY SECURITY REQUEST FORM

To be completed by the supervisor on behalf of an employee, and forwarded to the Area Security Partner for approval.

Supervisor Information

First Name	
Last Name	
WSU ID	
WSU Email	
Position # and Title	

Employee Information

First Name	
Last Name	
WSU ID	
WSU Email	
Position # and Title	

Workday Security Role Information

Is the role being requested a Finance role or HCM role? (Please choose only one):	
<input type="checkbox"/> Finance	
<input type="checkbox"/> HCM	
Does the employee require Personal Identifiable Information (PII) access?	
<input type="checkbox"/> Yes	
<input type="checkbox"/> No	
Role Name (if known)	
Description of duties:	
Organization type (e.g., cost center, supervisory organization)	
Organization ID	
Organization name	

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The security assignment should do the following (Please choose only one):

- Replace all other individuals' inheritance of this role from higher in the hierarchy
- Be added to this user while retaining all other individuals at this level through inheritance

Date the assignment should be effective (MM/DD/YYYY)	
Today's date (MM/DD/YYYY)	