

QUICKTIME ACCESS AUTHORIZATION FORM

Due to privacy act information, do not email this form. Fax or Blue Envelope Only.

Part I (to be completed by the servicing Human Resources Office):

Employee Name: _____
SSN: ____-____-____ Effective Date: _____
Organization Name (Directorate, Division, Branch, etc.): _____
Code: __ __ __ ____ (e.g. IN 01 99 60266300)

Human Resources Staff Signature

Date

Part II (to be completed by employee's supervisor):

To: Quicktime Master Administrator

Master Administrator	Phone Number	Fax Number	Mail Stop	Offices Served
Michele Foster	303-969-7083	303-969-5765	D-2620	All of NBC except OAS
Deloris Galloway	202-208-3138	202-208-7130	MS-1321	All of Office of the Secretary except OAS & NBC

For the employee named above, please establish a user name/ID and a temporary password and notify me what these are when it has been done:

The employee's work schedule is: Full-time Part-time hrs per week _____.

The employee's Timekeeper is _____ at phone # _____

Supervisor's Name

Supervisor's Signature/Date

Mail Code

Phone Number

Fax Number

Part III (to be completed by Quicktime Master Administrator):

To: Supervisor

For the employee named above: the Quicktime user name/ID is: _____; the Quicktime temporary password is _____. Please notify the employee that the temporary password must be changed no later than _____.

Please notify the timekeeper that they must enter employee profile information and assign the employee to you in Quicktime in order for you and the employee/timekeeper to access the time and attendance record. On-line help is available regarding changing a password and assigning an employee to a supervisor at www.nbc.gov. Also, the FPPS helpdesk at 303-969-5500 can provide assistance with both actions.

Quicktime Master Administrator Signature

Date

Mail Code

Phone Number

Fax Number