

Configuration Request Form

This document is for departments to obtain formal approval from the Executive Review Board (ERB) to allow HRIS to perform system configurations that may affect pay in Workday.

Instructions

1. Fill out **Parts A and B**. (HRIS will complete Part C.)
2. Attach this form to the ServiceNow request.
3. Notate questions and/or comments in the ServiceNow request.
4. You will be notified if your request was approved or denied via ServiceNow.

Part A

Requestor Name/EEID#:	
Requestor's Manager Name:	
Requesting Department:	
Date Submitted:	
Date Requested to be in Production:	
All Affected Groups:	

Does this affect pay?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Does this affect overtime?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Unsure
Is this change supported by the Personnel Rules?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Is this change supported by the Meet & Confer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Part B

I. Briefly describe the request and business justification.



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II. Describe any/all effects with pay, overtime, leaves of absence, pay rate, vacation accrual, sick leave, FMLA, etc. Please cite the section in the Personnel Rules/Meet & Confer/or Legal Citation Supporting this change.

III. List the affected employee population.

IV. Workaround if not approved.



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Part C

To be routed by HRIS for approval.

Approvers	Job Title	Approval (Click the box)
Diana Athey	HRIS Administrator	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tomy Mollas	Assistant Director, HRIS	<input type="checkbox"/> Yes <input type="checkbox"/> No
Nina Arias	Director, HR	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sheri Kowalski	Director, City Controller	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tanishia Dorsey	Interim Director, Information & Technology Services	<input type="checkbox"/> Yes <input type="checkbox"/> No

Date Approved or Denied: _____