



MISSOURI DEPARTMENT OF SOCIAL SERVICES
 CHILDREN'S DIVISION
Security Access Request Form

Identifying Information			
Employee Name (including middle initial)		Work Phone	
Agency Name			
Agency Address (Street, City, Zip Code)			County
Employee Social Security Number	Employee Work Email Address	Hire Date	
<input type="checkbox"/> Add NEWID/Access	<input type="checkbox"/> Delete Email	<input type="checkbox"/> Add Access	<input type="checkbox"/> Re-activate ID/Access
			Name Change
Prev. DSS User ID: _____			
Service to be Provided (Check programs that apply)			
<input type="checkbox"/> 70 Foster Care Case Management (FCCM) <input type="checkbox"/> 71 Child Placing RESOURCE Agency (Licensing worker) <input type="checkbox"/> 185 Intensive In-Home Services (IIS) <input type="checkbox"/> 120 Child Placing RESOURCE Residential Placement Unit (R{U}) <input type="checkbox"/> MOU 300 Case Management Inquiry <input type="checkbox"/> 310 FACC Inquiry <input type="checkbox"/> 330 FHCP Inquiry <input type="checkbox"/> 342 MSHP Inquiry Only		<input type="checkbox"/> 98 NYTD Chaffee Prov/ No Referral <input type="checkbox"/> 94 Chaffee Program <input type="checkbox"/> 95 Transitional Living Placements (TLP) <input type="checkbox"/> 70/71 Intensive Family Reunification Services <input type="checkbox"/> VPN (Global Protect) <input type="checkbox"/> VDI (VmWare Horizon) <input type="checkbox"/> OnBase _____ read only _____ modify (uploading) <input type="checkbox"/> State Email Account <input type="checkbox"/> Employee Learning Center	
Signatures			
Employee Signature	Date	Supervisor Signature	Date
Supervisor Name Printed		Supervisor Email Address	

For Approval, send this completed form (CD-173) and the [DSS Confidentiality Agreement Form \(MO 886-4461\)](#) to:

70 Foster Care Case Management/IFRS/Specialized: Regional Oversight Specialist

71 Child Placing Resource: Regional Licensing Consultant, Dawn.Phillips@dss.mo.gov

94/95 NYTD National Youth in Transition Database (94 Chafee Program / 95 TLP Transitional Living Program): Older Youth Transitional

Specialist 120 Child Placing Resource MOU with RPU Residential Placing Unit: Crystal.L.Wilson@dss.mo.gov

185 IIS Intensive In-Home Services: Local Site Coordinator

300/310/330 FHCP (inquiry only) Fostering Healthy Children Program: Larry.K.Smith@dss.mo.gov

Send completed forms to CD.SecurityRequests@dss.mo.gov