

Henrico County Human Resources

Request for HRMS Access

Department: _____
Employee Name: _____
User ID: _____
Location: _____
Work Phone: _____

ALL EMPLOYEES ARE AUTOMATICALLY ASSIGNED **EMPLOYEE DIRECT ACCESS (EDA)** AND **IRECRUITMENT EMPLOYEE CANDIDATE** WHEN HIRED.

Check the boxes below for ALL OTHER HRMS Responsibilities this employee should be assigned:

- COH iRecruitment Manager
- Manager Direct Access
- Henrico HRMS View Only - Org Security
- Gatekeeper/Timekeeper*
*Location: _____
*Former Gatekeeper/Timekeeper: _____
- Other (List Exact Responsibility Name Below)

Exact Responsibilities Requested/Explanation for Request:

Approvals:

Agency Head: _____ Date: _____
HRMS Approver: _____ Date: _____

When completed and approved by Agency Head, please email form to hrtransactions@co.henrico.va.us