**MCFRS DIVISION OF VOLUNTEER SERVICES**

**Personnel Information Management System (PIMS) User Request Form**

Please fill out and return to: Division Chief Wm. Alan Hinde, Montgomery County Fire and Rescue Service

Division of Volunteer Services, 100 Edison Park Drive, Gaithersburg, MD 20878

Date of Request: \_\_\_\_\_\_\_\_\_\_\_

User Function: (Check All Functions Needed)

|  |  |
| --- | --- |
| 🞏 LFRD Chief, LFRD President, IECS Updates (READ-ONLY ACCESS FOR EVERYTHING ELSE) | Apps\_PIMS\_Chiefs |
| 🞏 Membership Updates and Adding Membership Records | Apps\_PIMS\_Chair |
| 🞏 LOSAP Coordinator | Apps\_PIMS\_LosapCoordinators |
| 🞏Training Coordinator | Apps\_PIMS\_Chair (if not already added) |
| 🞏 LFRD Internal Affairs (READ-ONLY ACCESS) | Apps\_PIMS\_IntAffairsStaff |
| 🞏FROMS (READ-ONLY ACCESS) | Apps\_PIMS\_FROMSstaff |
| 🞏 SCBA Shop (Updates SCBA Fit Test Results) | Apps\_PIMS\_SCBA |
| 🞏 MCFRS Division of Volunteer Services Administration (No LFRD) | Apps\_PIMS\_Admin |
| 🞏 MCFRS IECS Administration (No LFRD) | Apps\_PIMS\_IECSadmin |

|  |  |
| --- | --- |
| 🞏 Add New User | 🞏Update Current User |

|  |  |
| --- | --- |
| Name of User (Last, First, MI): |  |
| Department:  |  |
| Alternate Email Address: |  |
| Phone numbers: |  |
| Reason for Access: |  |
| How long is access required? |  |
| Do you already have a Mont. County email? If YES, what is your user name? |  |
| If not, is County email needed? |  |

***Adding a new PIMS User? PLEASE TELL US WHO TO REMOVE:***

|  |
| --- |
| **🗷Remove User** |

|  |  |
| --- | --- |
| **Name of User (Last, First, MI):** |  |

***ALL SIGNATURES BELOW MUST BE ORIGINAL SIGNATURES AND CAN NOT BE AN ELECTRONIC OR TYPED. THIS FORM MUST BE PRINTED, SIGNED AND SENT WITH ORIGINAL SIGNATURES.***

***I have read, understand and agree to abide by the Montgomery County, Maryland Computer Security Policy and the Internet, Intranet, & Electronic Mail Policy.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature, Requestor Date

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LFRD Approver, Chief or Designee LFRD Approver Title Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_Division Chief\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

DVS Approver – Chief Hinde DVS Approver Title Date

*Form Updated: 07/17/2015*