

EDUCATION AND WORKFORCE DEVELOPMENT CABINET
Office of Employment and Training – Division of Grant Management and Support
275 EAST MAIN STREET
FRANKFORT, KY 40621
(502) 782-3093

Mail completed forms to: Jeannie Stratton 2-CA

OUTSIDE AGENCY REQUEST FOR RACF MAINFRAME CLEARANCE
COMPLETE FORM AND SIGN FOR ACCESS TO ANY DATA MAINTAINED OR OWNED BY THE EDUCATION AND WORKFORCE DEVELOPMENT CABINET

***** USER INFORMATION *****

Date: _____ SSN : _____
Name: _____ Job Title: _____
Cabinet: _____ Dept.: _____
Division: _____ Branch: _____
Address: _____ Phone # _____
City: _____ KY Zip: _____

IMS-PROGRAMS/OR MENU GROUP

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CICS PROGRAMS

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OTHER MAINFRAME PROGRAMS

KY NET RMDS TSO-Filename: _____
 Other: _____

AUTHORIZED SIGNATURES

I certify that the job duties of the user require access to the program/s requested and that the access complies with the appropriate use as specified in the COT-F015 Acknowledgment of Responsibility, the EDU-22. Acknowledgment of Policy and the Exchange of Information Agreement.

SUPERVISOR/MANAGER _____ **DATE** _____
UI DIVISION APPROVAL _____ **DATE** _____
SECURITY OFFICER _____ **DATE** _____