



**ALLEGHENY COUNTY**  
**KIDS INFORMATION SYSTEMS ACCESS REQUEST**  
**DEPARTMENT OF HUMAN SERVICES**  
**DHS Provider Agency**

**Please Send Completed Form To:**

ISAR –User Account Manager  
 DHS - AIMS  
 Human Services Building, 2nd  
 One Smithfield Street, Pittsburgh, PA 15222  
 or Fax to 412-350-5220

**EMPLOYEE INFORMATION (ALL REQUIRED FOR ACCOUNT)**

DATE:	LAST 4 DIGITS OF SSN:
NAME:	
<b>USER'S EMAIL ADDRESS:</b>	
JOB TITLE:	
PHONE NUMBER:	
PROVIDER NAME:	
PROVIDER ADDRESS:	

**TYPE OF ACCOUNT REQUESTED:**    NEW ACCOUNT                      CHANGE USER ACCESS                      CLOSE USER

PROVIDER SUPERVISOR/MANAGER APPROVAL \_\_\_\_\_

DATE \_\_\_\_\_

**EMPLOYEE ACKNOWLEDGEMENT OF UNDERSTANDING (REQUIRED FOR NEW ACCOUNTS)**

I have read and agree to comply with the terms of Allegheny County Policy for user accounts. I understand that violation of this policy may result in termination of user account.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

**ACCESS NEEDED (REQUIRED FOR NEW ACCOUNTS AND CHANGES TO ACCOUNTS Place a check mark next to access the user needs. KIDS PROVIDER CONTACT (KPC) (ONE PER AGENCY)**

\_\_\_\_\_ SUPERVISOR \_\_\_\_\_

CASEWORKER \_\_\_\_\_

**ALLEGHENY COUNTY DEPARTMENT OF  
HUMAN SERVICES USER ACCOUNT  
POLICY**

**It is the Policy of the Allegheny County Department of Human Services (DHS) that all users must have a unique identifier in order to access the DHS Computer Network or any of the various DHS applications.**

**Each user must have his/her own user account. This is required as a matter of security. Sharing Usernames and Passwords is a violation of both the DHS Policy and HIPAA Security Policies.**

**When access to the DHS Computer Network or a DHS application is needed, the appropriate User Account Request Form must be completed, approved, and submitted to the User Account Manager in the Administrative and Information Systems Management Office.**

**Likewise, when a user no longer requires access to the DHS Computer Network of a DHS application, the appropriate User Account Request Form must be submitted to close the user's access to the Computer Network or that particular application. For example, this action should be taken when a user leaves employment at DHS/Provider/Agency, moves into a position no longer requiring his/her access to the DHS Computer Network and/or any of the various DHS applications, etc.**

**Questions regarding this Policy or user accounts in general, may be addressed to the DHS Applications Service Desk at 412-350-4357, option 2 or to the DHS Service Desk via email at [servicedesk@alleghenycounty.us](mailto:servicedesk@alleghenycounty.us).**

**The term “user” refers to anyone who has a user account to any DHS application.**