

5 N 5th Street
 Harrisburg PA 17101-1905
 Toll-Free: 1.888.773.7748
 www.psers.state.pa.us

PSERS Employer Security Administrator Authorization



PSRS-1270 (09/2013)

Terms and Conditions of Use:

By registering as a PSERS Employer Security Administrator, you will be deemed to have read, understood and accepted the disclaimers that are presented on the PSER Website at <http://www.psers.state.pa.us/disclaim.htm>.

Duties and Responsibilities:

The Employer Security Administrator and other employer users of PSERS' Web-based applications have responsibility to comply with all Commonwealth of Pennsylvania and PSERS information security and access policies. Employer Security Administrator responsibilities include but are not limited to the following:

1. The Employer Security Administrator assumes custodian responsibilities for access to PSERS information by creating and deleting PSERS application user ID's and granting and denying application access for those users.
2. PSERS Web-based applications and PSERS information assets are used strictly for business purposes. This means that the administrator must protect these information resources by establishing user ID's and granting access to applications only when access to PSERS data is consistent with the assigned job duties of the employee for whom the user ID is established.
3. Instructs the users in their responsibilities. All users have the responsibility to:
 - ♦ Use the resource only for the purposes specified by PSERS;
 - ♦ Comply with controls established by PSERS or public law;
 - ♦ Prevent disclosure of sensitive information.
4. By signing this form, the Employer Security Administrator acknowledges and accepts the above duties and responsibilities. Violations of PSERS' security policy will result in the termination of your access account.

Create Employer Security Administrator

Delete Employer Security Administrator

PSERS Employer Security Administrator		
Employer Name	Employer Number	Administrator's Last Name
Administrator's Employer Mailing Address		Administrator's First Name
		Administrator's Email Address
		Administrator's Telephone

By signing this form, I acknowledge the duties and responsibilities listed above and agree to comply with these and all PSERS security policies.

PSERS Employer Security Administrator Signature	Date
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Employer Authorization	
Name	Title/Position
Approving Signature	Date

PSERS Use Only	Username	PSERS Administrator Initials
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