

CUNYFirst Person of Interest (POI) (RF Employees Only)

General Instruction:

Supervisor Authorization:

This form must be completed and returned to Human Resources (HR) before the request for access can be processed. Once the request is processed, the individual will be provided with **basic system access** – HR will notify the employee to claim his/her account and to pick up Hostos ID Card. For additional access or access to advanced modules (e.g. Campus Solution for student records), please contact Hostos' CUNYFirst Help Desk @ 718-664-2555 for instructions.

	Access End Date: (mm/dd/yyyy) Access Type: (check one) New or Renew					
Signature		Date				
Las	st, First Name (print)		Department/Program Name			
Busine	ss Email		Business Phone			
Department Head Auth (Please sign again if superviso						
Signature			Date			
Last, First Name (p	rint)		Department/ <i>Program Name</i>			





CUNYFirst Person of Interest (POI) HR Data Form (RF Employees Only)

Employee Instruction:

Please complete the information on this page. Please print legibly and return the entire form.

Last Name	First Name			Middle Name	
We will not accept P.O. Box address) ome ddress					
No. Street	Apt #	City	State	Zip	
lephone Number ()		()		
Hon	ne		Day Time		
ountry of Birth		(This is an o	optional question, lea want to self-identify)	ving it blank indicates	
ghest Education Level:					
ilitary Status:		atus, enter 'Not a Vete	eran')		
ostos business email address:					
ace a check next to each question:					
ender: Female _ Male Non-Binary (X)	Marital Status:	Single _ Marri	ed _ Other: specify		
re you eligible to work in U.S.: Yes _	_ No				
For HR use only					
	Processor Initial & Date				

500 Grand Concourse, Bronx, NY 10451



Eugenio Maria de Hostos Community College