



PeopleSoft Request Form Person of Interest (POI)

New Reoccurring SDCCD Studen	t Current Employee	Prior Employee
USER INFORMATION		
Full Name:(No nicknames) First	Middle	Last
Email Address:	Phone Number:	
Supervisor Name:	Reports To Pos #:(Not th	ne Empl ID)
Location:	(NOC CI	ie Empirio)
District Division Only:	POI Type:	
Dept Code:	Competency (If applicable):	
Child Dev/Clinical Experience: Yes No	Start/End Date: From:	To:
Access Needed: SDCCD Email Address Campus Solutions	Network Login *HCM	Canvas Finance
*Request HCM Access through IT Service Desk. Link: https://help.sdccd.edu/support/catalog/items/251 .		
EMPLOYMENT		
Volunteer Form Received: Search Match Found:	TB Received:	DOJ Cleared: POI Type:
POI Entered by:	Date:	