

## I-PERFORM SYSTEM ADMINISTRATOR DESIGNATION FORM

The following employee is being designated as an I-PERFORM system administrator for

\_\_\_\_\_  
Agency Name

Name \_\_\_\_\_

Title \_\_\_\_\_

\_\_\_\_\_  
Agency Director/Delegated Authority Signature

\_\_\_\_\_  
Date

As an assigned I-PERFORM administrator I understand information available to me in the role of an administrator is to be kept confidential at all times.\*

\_\_\_\_\_  
Employee/Administrator Signature

\_\_\_\_\_  
Date

After signatures are completed, please forward to your DHR Human Resource Consultant.

*\*Any additional I-PERFORM system administrators created by the agency designee must sign a document stating that they understand the information available to them is strictly confidential.*