

Agency Registration:
Director, CIO, Fiscal, IT and Telecommunication Form Instructions
All Telecommunications Services

Authorization Form Completion Instructions

Complete all information pertinent to changes in key personnel and all required fields as indicated.

Agency Information: Please print the entire agency name and provide the agency 3-digit AU Code and 3-digit Alpha Code. (REQUIRED FIELD)

Director Information: Please provide the name and all requested contact information for the agency (board, commission, or university) head. In many instances, the agency head is a "Director"; however, for some boards and commissions, the agency head may be titled as an Executive Director, Secretary, or Chairman. Provide the appropriate title as indicated. (REQUIRED ONLY WHEN CHANGING DIRECTOR OF RECORD.)

Fiscal Officer: Please provide the name and all requested contact information for the chief fiscal or financial officer of the agency, board, commission, or university. The form must specify whether or not the Fiscal Officer is authorized to expend funds of behalf of the agency. (REQUIRED ONLY WHEN CHANGING FISCAL OFFICER OF RECORD.)

Information Technology (IT) Manager/Chief Information Officer (CIO): Please provide the name, title, and all requested contact information for the IT Manager or CIO of the agency, board, commission, or university. The form must specify whether or not the IT Manager or CIO is authorized to expend funds of behalf of the agency. (REQUIRED ONLY WHEN CHANGING IT MANAGER/CIO OF RECORD.)

IT Coordinator: The IT Coordinator is responsible for submitting Enterprise Service Request (ESR) forms. Please provide the name and all requested contact information for the IT Coordinator of the agency, board, commission, or university. By the nature of IT Coordinator duties, they are authorized to expend funds on behalf of the agency. (REQUIRED ONLY WHEN CHANGING IT COORDINATOR OF RECORD.)

Note: Please complete a separate Authorization Form (Page 2) for each newly appointed IT Coordinator.

Chief of Staff: Please provide the name and all requested contact information for the agency (board, commission, or university) Chief of Staff. (REQUIRED ONLY WHEN CHANGING CHIEF OF STAFF OF RECORD.)

Telecommunications Coordinator: Please print the name of the person appointed and authorized by the agency head to perform the duties of Telecommunications Coordinator. There are two types of Coordinators: Main (those with spending authority who can sign service orders committing agency funds) and Supplemental (those who cannot spend agency funds, but wish to receive email notifications and announcements). Each agency must have at least one Main Coordinator. (REQUIRED ONLY WHEN CHANGING TELECOMMUNICATIONS COORDINATOR(S) OF RECORD.)

Note: Please complete a separate Authorization Form (Page 2) for each newly appointed Telecommunications Coordinator.

Address: The address that you provide in this area should be the address of the work location of the designated Coordinator. Please specify whether or not the Coordinator has access to State mail/messenger service.

Phone: This should be the phone number of the individual designated as Telecommunications Coordinator.

E-mail Address: It is imperative that an e-mail address be provided. We are increasingly moving towards a paperless office environment whereby all notices about upcoming events, policies, products and resources are disseminated via e-mail.

Areas of Responsibility: Please check/indicate which types of purchases the Coordinator is authorized to complete. (REQUIRED FIELD)

Spending Authority Designation: Identify whether Coordinator is

- A. a "Primary Coordinator" who is able to sign orders and expend agency funds, receive mailings, use EMS and CentrexMate, and make changes in State Directory -

OR

- B. a "Secondary Coordinator" who can NOT sign orders NOR expend agency funds, but can still receive mailings, use EMS and CentrexMate, and make changes in State Directory.

Director's Signature: REQUIRED. The agency head/Director must sign the form when delegating spending authority to a fiscal officer, IT Manager, or Telecommunications Coordinator.

Note: For audit purposes, the Customer Solution Center cannot process service requests unless spending authority of the Coordinator can be confirmed. Incoming service orders are checked against a database of Coordinators with spending authority. If a service order does not contain an authorized signature, it will be returned to the agency – or the submitting Coordinator will be contacted.

Director's Name: Same person as above - - please print.

Return the BCCS Agency Registration form to:

**Central Management Services
BCCS - Agency Relations
120 W. Jefferson Street – 3rd floor
Springfield, IL 62702-5103**

If changes are reported ONLY in Telecommunications Coordinator(s), return the form to:

**Central Management Services
Attn: Customer Service Center
120 W. Jefferson Street - 2nd floor
Springfield, IL 62702-5103**