



SCRIC TIMEPIECE User Form
OWEGO

District Name: ___ Owego _____ Date: _____

User's Name: _____

Email Address: _____ User's Phone Number: _____

Copy Access From: _____

PLEASE CIRCLE ONE USER ROLE. The screens listed for each role is what they user will have

Non-Approver Role	
Reports they will have available:	
Employee Adjusted Hrs/Schedule Hrs Exceptions Employee Approval Status Employee Exceptions Employee Late In/Early Out Employee Listing Employee Punch Detail Employee Schedule Employee Shift Employee Timesheet Employee On-Premises Punch Audit Punch Summary	
SUB WORK GROUPS: Please List	

District Administration Role	Reports they will have access to
Access to all screens	Access to all Reports
SUB WORK GROUPS: Please List	

Approver Role	Reports they will have access to
Approve/Disapprove Time Employee Dashboard Review Employee Punches	Employee Adjusted Hrs/Schedule Hrs Exceptions Employee Approval Status Employee Attendance Balance Employee Exceptions Employee Late In/Early Out Employee Listing Employee Punch Detail Employee Schedule Employee Shift Employee Timesheet Employee On-Premises Punch Audit Punch Summary Attempted Punch Log
SUB WORK GROUPS: Please list	

Additional Notes

STATEMENT OF CONFIDENTIALITY:

By submitting this application, you are agreeing to:

1. I will not share my password.
2. That any action or activity taken with a password will be attributed to the owner of the password.
3. Not obtain unauthorized access to and use of an account and network facilities, for personal or private use.
4. Not divulge the contents of any database holding personnel and confidential information related to children, parents, or school business operations.

The Help Desk reserves the right to change any user's password if they are aware the password has been shared.

When there is any indication or unauthorized use or abuse of the system or any other action which interferes with the proper functioning of the system, or infringes on the rights or other users, the NYS Education Department, Broome-Tioga BOCES, or other appropriate agencies will be appropriate authorities for disciplinary or legal action. System users have a responsibility to maintain the integrity of the system and to use it only in an authorized and appropriate manner.

USER SIGNATURE:

AUTHORIZED SIGNATURE:

Refer any questions regarding these policies or procedures to 607-766-3936. You will be connected to the Financial Services Help Desk. Please fax completed forms to the Financial Services Help Desk @ 607-766-3800 Option 3 or email at financialservices@btbooces.org