

Report Request for HR Information



INFORMATION

1. This Report Request form is to be used to obtain Human Resource information. Please ensure that you provided as much details as possible in this request to assist us with meeting your requirements. This may include attaching any other documents relevant to your request, eg: an existing report you would like modified.
2. The Button to Submit Form will attach this application to an email addressed to HR Systems. Attach relevant documents and add any message before sending.
3. To clear data from the Report Specification section, click the yellow Clear Button located at the top of section 2.
4. This form requires a Digital Signature, click the link for further information on [Digital Signatures*](#)
5. Any enquiries, email hrrsystems@flinders.edu.au or contact 8201 3700

1. CONTACT DETAILS – to be completed by the Requestor

Requestor Name:	Date Requested:	Phone:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please check box - I acknowledge my responsibility for the proper use and confidentiality of the information available to me in this report. In particular, I undertake to use this information for this purpose only.

Requestor Digital Signature*: *Digital Signature Information	Date:
<input type="text"/>	<input type="text"/>

2. REPORT SPECIFICATIONS

What is the purpose of the report:

[Click to Clear Report Specs](#)

Eg: Auditing, budgeting, restructuring, email listing, head count, statistics etc.

Who will be viewing/using the report:

Eg: Finance Manager, Senior Management, OHS working group etc.

Select the type(s) of people to be included in this report:

<input type="checkbox"/> Current Employees	<input type="checkbox"/> Ceased Employees	<input type="checkbox"/>
<input type="checkbox"/> Academic Permanent Employees	<input type="checkbox"/> Academic Contract Employees	<input type="checkbox"/> Academic Casual Employees
<input type="checkbox"/> Professional Permanent Employees	<input type="checkbox"/> Professional Contract Employees	<input type="checkbox"/> Professional Casual Employees
<input type="checkbox"/> Academic Status	<input type="checkbox"/> Scholarships	<input type="checkbox"/> All (include ALL employee types)
<input type="checkbox"/> Other (Please specify)	<input type="text"/>	

Please provide the Criteria the report is to be based on:

Eg: Classification HE08 and above, Employees in the Dep of Surgery only, Casual staff in Education and who they report to etc.

Data Information as at date (Please enter relevant date(s) in ONE of the options below):

Return information for the period of time between:	<input type="text"/>	AND	<input type="text"/>
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OR

Return information as at a date in time:	<input type="text"/>
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Please indicate when the report is required:

How often might this report be requested:

Report Required in:	<input type="text"/>	Data Frequency:	<input type="text"/>
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Any other details relevant to the request:

Eg: Information displayed on spreadsheet, Payroll #, Job #, First Name, Last Name, Preferred Name, Title, Gender, Department, Position #, Classification etc.

Click Button to Submit Form:

3. HR SYSTEM AUTHORISATION

Authorisation:	Authoriser Digital Signature:	Date:
HR Systems Authoriser:		

4. HR SYSTEM USE ONLY

Report Name:	
Report Location:	
Distributed Date:	
ZenDesk Job #:	
Assigned HRS:	

Special Instructions / Things to Note: