

Request for Electronic Person of Interest (ePOI)

This form does not apply to current faculty, staff, or students. It is also not applicable to prospective or applicant students. All other individuals may be eligible to complete this form. The purpose of this form is to identify the Applicant's (Person of Interest) relationship with the University prior to granting access to University resources.

In accordance with University of Houston System policy, both the applicant and the sponsor must not be physically located in any country listed in Texas Executive Order GA-48 at the time of requesting or using University IT resources. Access to University resources from any of these restricted countries is strictly prohibited, regardless of role or affiliation. The full list of restricted countries is available in the University's Texas Executive Order GA-48 site.

By signing this form, both the applicant and the sponsor confirm that the information provided is accurate and complete.

- The applicant must complete and sign the form, then return it to the sponsor.
- The sponsor is responsible for completing the remaining sections and submitting the fully completed and signed form to their departmental Business Office for processing.

For questions about this process or form, please contact UHCL - humanresources@uhcl.edu.

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APPLICANT PERSONAL INFORMATION			
LAST NAME:	FIRST NAME:	MIDDLE NAME	
HOME STREET ADDRESS:	CITY:	STATE: ZIP CODE:	
EMAIL ADDRESS: HOME PHONE	E: DATE OF BIRTH:	GENDER:	=
Please select the Unique Identifier Type and SSN Requirements)	d provide the Unique Identifier (Se	e ePOI Service Type section for	
Unique Identifier Type			
Unique Identifier:			
If you have concerns about providing your verbally. Any information you provide on information will not be disseminated for any	this form will strictly be used fo		
	Order GA-48. The Applicant affirm:	ate and complete, and further acknowledges s they are not located in a restricted country	
Signature of Applicant:		Date Signed:	



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SP	ONSOR INFORMA	TION					
Sp	onsor PSID:		Start Date of ePOI Service				
Sp	onsor Name:						
	onsor partment:						
Se	lect the ePOI Servic	e Type that best describes the	Applicant's role with the	University of Houston System.			
eР	OI SERVICE TYPE:	: (See ePOI Service Type sect	ion)				
С	Choose an item. Note: For faculty member who will be hired enter Posting Number						
Un	iversity Information	Technology Resources Neede	ed for Applicant:				
		st to set up system credentials does not include setup of an e		ystems and campus-wide digital t Suite license.	platforms.		
SA MA	M Policy: Use of Ele	cies concerning computer use: ectronic Messaging Services b able Use Policy for UHCL Inform ocedure	y Employees (SAM 07.A	•			
Th	e Sponsor must re	eturn the completed form to	their Department Busi	ness Office for processing.			
wit	h Texas Executive (irms that neither they no	ate and complete and certifies controlled the Applicant are located in any ocations.			
Sig	nature of Sponsor:			Date Signed:			