CalJOBSSM System Access Request Form - Sample

Request Type AGENCY STAFF Does the staff currently have or has ever had a Call If yes, CallOBS username: laijdoe	OBS staff account? Yes
Indicate the action needed for this staff account: Update Existing Account	
If inactivating, provide date and time to inactivate account: (last date/time access is needed)	
Staff Information Organization Type: Local Workforce Development	
Subgrantee Code ¹ : LAI	ARU2: apply.
First Name: Jane	Last Name: Doe
Agency Name: El Proyecto WorkSource One Stop	Job Title: Case Manager
Office Zip Code: 90010 Phone Number: 1	23-456-7890 Email ³ : jdoe@samplemail.com
Primary Office Information Local Workforce Development Area Region: City of Los Angeles	
Default Office:	
Other Office Locations:	
Does the staff need supervisor level access to the o	offices above? Yes
Does the staff need supervisor level access to the or Additional access needed (select all that apply):	offices above? Yes Does not
·	Does not
Additional access needed (select all that apply):	Does not apply.
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements	Does not
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements	Does not apply. Yes No Select Yes
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement Information Security and Privacy Awareness Training	Does not apply. Yes No Select Yes Signed: Yes No Most Recent Date: February 26, 202
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement	Does not apply. Yes No Select Yes Signed: Yes No Most Recent Date: February 26, 202
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement Information Security and Privacy Awareness Training Most Recent Date: February 26, 20 Requestor Information PROGRAM DIRECTOR/MIS	Does not apply. Yes
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement Information Security and Privacy Awareness Training Most Recent Date: February 26, 20	Does not apply. Yes No Select Yes Signed: Yes No Most Recent Date: February 26, 202 Ing (or equivalent) Completed: Yes No
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement Information Security and Privacy Awareness Training Most Recent Date: February 26, 20 Requestor Information PROGRAM DIRECTOR/MIS Name: John Smith Email: jsmith@samplemail.com	Does not apply. Yes
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement Information Security and Privacy Awareness Training Most Recent Date: February 26, 20 Requestor Information PROGRAM DIRECTOR/MISS Name: John Smith	Does not apply. Select Yes Signed: Yes No Most Recent Date: February 26, 202 Ing (or equivalent) Completed: Yes No SADMINISTRATOR Job Title: Program Director
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement Information Security and Privacy Awareness Training Most Recent Date: February 26, 20 Requestor Information PROGRAM DIRECTOR/MIS Name: John Smith Email: jsmith@samplemail.com	Does not apply. Select Yes Signed: Yes No Most Recent Date: February 26, 202 Ing (or equivalent) Completed: Yes No ADMINISTRATOR Job Title: Program Director Phone Number: 789-456-1230
Additional access needed (select all that apply): DVOP LVER TAA ETP Data Security Requirements Staff has a business need for CalJOBS access? Employee or Contractor Confidentiality Agreement Information Security and Privacy Awareness Training Most Recent Date: February 26, 20 Requestor Information PROGRAM DIRECTOR/MIS Name: John Smith Email: jsmith@samplemail.com Signature: John Smith Digitally signed by John Smith Date: 2025.02.26 16:17.44-08:007	Does not apply. Select Yes Signed: Yes No Most Recent Date: February 26, 202 Ing (or equivalent) Completed: Yes No ADMINISTRATOR Job Title: Program Director Phone Number: 789-456-1230

Return completed and signed form to CalJOBS System Access Coordinator

¹ Only applies to Local Workforce Development Area and Community-based Organization staff.

² Only applies to Workforce Services Branch staff.
³ Email must be an organization-provided email (no personal email addresses allowed).

CalJOBS System Access Request Form Reporting Instructions

The State has updated its policy on CalJOBS access. All staff must complete the new CalJOBS System Access Request Form. Below is information about how to complete the form and the required fields.

AGENCY STAFF

Request Type:

This section must be filled out by the staff member and relates to their CalJOBS account.

Does staff currently have or has ever had a CalJOBS account? Select Yes or NO from the drop downlist. Select Yes for current accounts or Select No for NEW accounts.

CalJOBS Username – If you currently have a CalJOBS username enter it in the section provide. (example - laijdoe)

Indicate the action needed for this staff account: Select from the available drop-down list.

Drop down Available: Create New Account, Inactivate Account, Reset Password, Update Existing Account.

Staff Information:

In the Staff Information section, enter the following: First Name, Last Name, Agency Name, Job Title, Office Zip Code, Phone Number and Email.

In the Organization Type and Subgrantee Code, make the following selections:

Organization Type: Local Workforce Development Area

Subgrantee Code: LAI – This is the designated code for the City of Los Angeles area.

Primary Office Information:

In the Primary Office section, you will enter the Local Workforce Development Area and the Supervisor Level Access.

Supervisor Level Access: Select Yes or No

Select Yes if you are a City of LA staff member, Program Director, or MIS Administrator.

Select No for all other staff members.

Data Security Requirements:

In the Data Security Section, you will identify if you have completed the Employee or Contractor Confidentiality Agreement and have received the Information Security Awareness Training. All staff are required to complete the following before CalJOBS access can be given.

- 1. Complete Information and Security Awareness Training (ISPA training).
- 2. Sign the Contractor Confidentiality Agreement (E-1 Form).

MIS ADMINISTRATOR/PROGRAM DIRECTOR

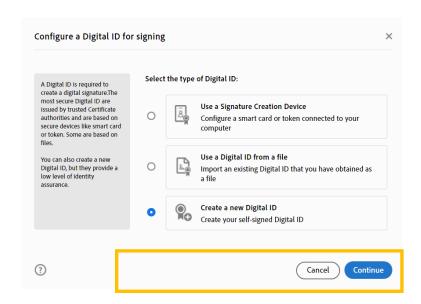
Requestor Information:

The requestor Information section must be completed and signed by the Program Director or MIS Administrator. A signature is required in order approve the request.

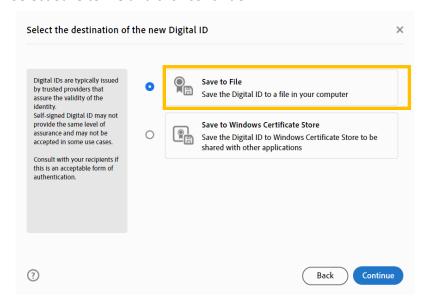
Steps to Create Digital Signature

To create the digital signature, follow the steps below:

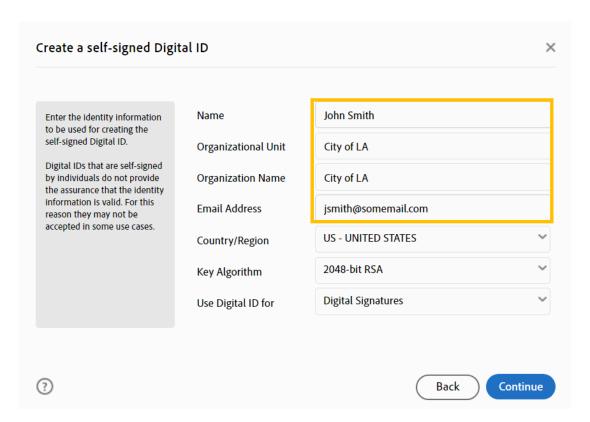
Step 1. Click on the signature box and you will see the window pop up below. Select Create new Digital ID and press continue.



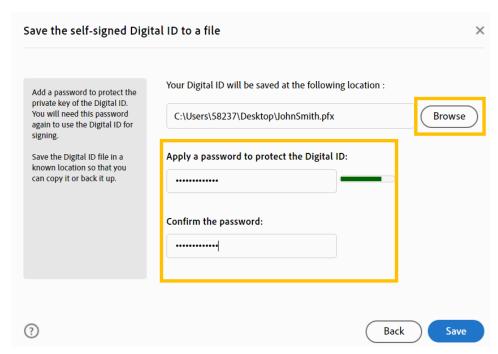
Step 2. Select Save to file and click continue.



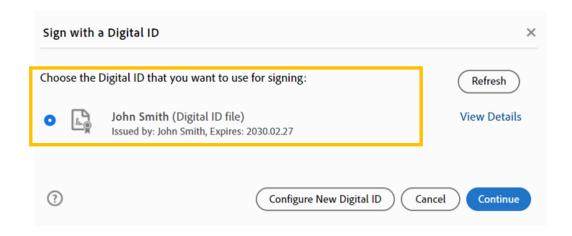
Step 3. Enter your name, agency information, email address and click on continue.



Step 4. Next, click on Browse to select the folder where you are going to save the digital signature and create a password and save.



Step 5. Next, select your digital signature and click on continue.



Step 6. In the last step, enter the password you selected and click on sign. This will add the digital signature to the document.

