

CUNYFirst Person of Interest (POI) HR Data Form



Who needs to fill out the POI form and Why?

A Person of Interest (POI) record must be created in CUNYFirst for non-staff associates and Hunter College personnel paid by other entities to offer essential technological services efficiently. The individual receives an 8-digit "EMPLID" after creating this POI record, which they can subsequently be used to access College services such as:

Microsoft Office 365 Outlook: Teams, OneDrive storage, MS Word, PowerPoint, and Excel, as well as Outlook email. CUNYFirst Account

Any other services that require EMPLID

Examples of individuals who need a POI record with EMPLID in CUNYfirst include:

Hunter College Foundation Employees Non Tax Levy Employees

* You are not required to fill out a POI form if your job does not require you to have a Hunter College staff email or if you do not require access to M365. For example, CUNY students and Graduate Assistants already have CUNYFirst access and an 8-digit EMPL ID, which will grant them access to M365.

How to Establish a CUNYfirst POI Record with an EMPLID:

To create a POI record in CUNYfirst, the department must complete a POI HR Data Form and return it to the Office of Human Resources. Once this form is received and fully approved, the Office of Human Resources will enter the POI into CUNYfirst and notify the employee. Please note the following regarding POI appointments:

- 1. The maximum time a POI can be appointed is one year.
- 2. The form requires an appointment end date, which will prompt the removal of the POI's access to the College's services and systems.
- 3.To ensure continuity of access, the department must submit a yearly POI renewal form.
- 4. When a POI assignment ends before the original end date on the POI Form, the department must submit a termination notice to HR.

Employee Instruction:

Please complete the information on the next page. You must provide a valid government issued photo ID which indicates your date of birth in order for us to verify your identity and ensure proper entry of your personal information. HR will not process the form if you do not supply complete and correct information. Access will automatically be terminated if false information is provided. Please print legibly and return the entire form.



Pre Application Questionnaire



Department Full Name Please answer the following questions thoroughly. Indicate N/A if not applicable. 1. Provide a brief description of why access is needed. 2. Are you currently a CUNY student or employee? Please describe. 3. Active Hunter College Students: If you already have an active student hunter email(@myhunter), does your job also require a Hunter College staff email address? Please describe. **4. Graduate Teaching Fellows:** If you have an active Graduate Center email address email, does your job also require a Hunter College staff email address? 5. Do you have a Hunter College Net ID? 6. Did you have a Hunter College Staff email prior M365 Email Merge?





Personal Data Form

Biographical Details:					
	Date of Birth:	Date of Birth:			
Prefix:	Gender: Female (F)	NonConf Unspecif			
	Male (M) ☐ Non Binry (X) ☐] Transgdr] NtListed			
Last Name:	Marital Status:				
	Single	Married			
First Name:	Divorced	Divorced Widowed			
	Legally Sepa	rated			
Middle Name:	SSN:	SSN:			
	CUNYFirst Empl ID(if	applicable):			
Contact Information:					
Address:	City/State/Zip Code:	City/State/Zip Code:			
Home Number:	Cell Phone Number:	Cell Phone Number: Email:			
Work Phone Number:	Email:				
Highest Educational Level	*F4hnia Oceann				
		Military Status			
Less than HS Graduate	*Ethnic Group Are you Hispanic or Latino?	Military Status			
Less than HS Graduate HS Graduate or Equivalent	Are you Hispanic or Latino? Yes No	No Military Status			
Less than HS Graduate HS Graduate or Equivalent Technical School	Are you Hispanic or Latino?				
HS Graduate or Equivalent	Are you Hispanic or Latino? Yes No What is your Race or Ethnicity? Select	No Military Status Disabled Veterans Recently Separated Veteran Active Duty Wartime/			
HS Graduate or Equivalent Technical School	Are you Hispanic or Latino? Yes No What is your Race or Ethnicity? Select any that apply.	No Military Status Disabled Veterans Recently Separated Veteran Active Duty Wartime/ Campaign Badge Veteran			
HS Graduate or Equivalent Technical School 2-Year College Degree	Are you Hispanic or Latino? Yes No What is your Race or Ethnicity? Select any that apply. American Indian or Alaska Native	No Military Status Disabled Veterans Recently Separated Veteran Active Duty Wartime/			
HS Graduate or Equivalent Technical School 2-Year College Degree Bachelor's Level Degree	Are you Hispanic or Latino? Yes No What is your Race or Ethnicity? Select any that apply. American Indian or Alaska Native Asian Black or African American Italian American	No Military Status Disabled Veterans Recently Separated Veteran Active Duty Wartime/ Campaign Badge Veteran Armed Forces Service Medal Veteran Protected Veteran- Chose not to			
HS Graduate or Equivalent Technical School 2-Year College Degree Bachelor's Level Degree Master's Level Degree	Are you Hispanic or Latino? Yes No What is your Race or Ethnicity? Select any that apply. American Indian or Alaska Native Asian Black or African American	No Military Status Disabled Veterans Recently Separated Veteran Active Duty Wartime/ Campaign Badge Veteran Armed Forces Service Medal Veteran Protected Veteran- Chose not to self-identify the classification			
HS Graduate or Equivalent Technical School 2-Year College Degree Bachelor's Level Degree Master's Level Degree Doctorate (Academic)	Are you Hispanic or Latino? Yes No What is your Race or Ethnicity? Select any that apply. American Indian or Alaska Native Asian Black or African American Italian American Native Hawaiian or Other Pacific	No Military Status Disabled Veterans Recently Separated Veteran Active Duty Wartime/ Campaign Badge Veteran Armed Forces Service Medal Veteran Protected Veteran- Chose not to			

^{*}We are required by law to monitor our Affirmative Action Program, and to collect ethnic data on all employees under Federal Executive Order #11246. Submission of this information is voluntary





Citizenship Status: Are you a U.S Citizen: Yes No	Resident Alien Non- Resident Alien				
If No: Country of Origin:					
Do you have clearance to work in the U.S? Yes No	Type of Visa:				
Emergency Contacts Information:					
Name/ Relationship:	Name/ Relationship:				
Address:	Address:				
City/ State/ Zip Code:	City/ State/ Zip Code:				
Home Number:	Home Number:				
Cell Number:	Cell Number:				
I hereby certify that the information provided is accurate:					
Signature:	Date:				

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Application



Name: First		Last	N	ſiddle	
Social Security #:					
CUNY Employee ID:		Department:			
Effective Start Date	Effective End Date:				
POI Type:					
HCF	Non Tax Levy	Ot	her:		
Department Approval			HR Approval		
Name:			Name:		
Title:			Title:		
Department:			Approved:	Denied:	
Approved: Denied:			Signature:		
Signature:			Date:		
Date:					