

DEPARTMENT OF THE ARMY
SAVANNAH DISTRICT, CORPS OF ENGINEERS
CESAS-IM-I P.O. BOX 889
SAVANNAH, GEORGIA 31402-0889

DISTRICT PAMPHLET
NO. 25-1-9

1 July 1999

Information Management
DEACTIVATE INFORMATION SYSTEM ACCESS CODES

1. Purpose. This pamphlet provides procedures to control the security and integrity of the District's information systems.
2. Applicability. All managers/supervisors in the Savannah District.
3. Reference. AR 25-1, 18 November 1988, The Army Information Resource Management Program.
4. Responsibilities. Managers/supervisors are responsible for completing the appropriate forms necessary to clear team members from access to the District's information systems, whether team members are leaving the District or transferring from one division to another division in the District.
5. Procedures.
 - a. If team member is leaving the District, complete CESAS Form 1061, Clearance of Personnel.
 - b. If team member is transferring from one division to another division in the District, complete CESAS Form 1276, Deactivate Information System Access Codes. This form must be handcarried to CESAS-IM-I (field offices, submit by mail) **before** the team member moves to new location.

Appendices	/s/
Appendix A - CESAS Form 1061	JOSEPH K. SCHMITT
Appendix B - CESAS Form 1276	COL, EN
	Commanding

This District Pamphlet supersedes DP 25-1-9 dated 14 November 1996.

CLEARANCE OF PERSONNEL

INSTRUCTIONS: Employees will hand carry this form to each office listed.

NAME OF EMPLOYEE (Last, First, Middle Initial)

FORWARDING ADDRESS

ORGANIZATIONAL UNIT

LAST WORK DAY

CHECKLIST

YES OR N/A

Initials & Date

1. TIMEKEEPER

- a. Employee advised of leave credit?
- b. Employee signed SF71 for all leave?

2. RESOURCE MANAGEMENT OFFICE (RM-F)

3. CONTRACTING DIVISION (CT) 5900

- a. Ordering Officer authority terminated?
- b. Contracting Officer authority terminated?
- d. If a credit card holder, has card been turned in?

4. CREDIT UNION 234-8978

5. INFORMATION MANAGEMENT OFFICE (IM)

- a. Library (IM-PL) 5461-- Books turned in?
- b. Records Management Section (IM-PR) 5966
- c. Information Integration & Implementation Branch (IM-I) 5308

6. EQUAL EMPLOYMENT OPPORTUNITY OFFICE (EE) 5334

7. PROPERTY MANAGEMENT SECTION (LM-SP) 5728

- (1) Is employee a responsible employee/or involved in Report of Survey?
- (2) Has outgoing responsible employee inventoried all his/her Government property?
- (3) Has all Government property been transferred to another responsible employee?

8. SECURITY (SL) 5500

- a. ID Card (DA Form 1602) turned in?
- b. DA Form 2962 (Debriefing for employee with Security Clearance)

9 GSA (4208) -- Keys and/or key cards turned in?

10. IMMEDIATE SUPERVISOR

- a. Have all areas been cleared?
- b. Has copy of Clearance been given to employee?
- c. Has all indebtedness to U.S. Government been satisfied?
- d. Has performance appraisals been completed?
- e. Have training agreements (obligated service) been satisfied?
- f. Is employee indebted for advanced leave?
- g. Has travel folder been provided supervisor?

IMMEDIATE SUPERVISOR (Mark out non applicable statement[s].) I have personally accounted for all accountable property charged to the possession of this individual and now have these items in my personal possession and control, or I expect this property to be immediately issued to a new employee. I will provide LM appropriate information upon reissuance to new employee, or employee has returned all accountable property to warehouse.

SUPERVISOR-You may contact areas on the checklist to determine if it is necessary that your employee clear this area.

SUPERVISOR'S SIGNATURE _____

REMARKS SECTION

SIGNATURE

EMPLOYEE

Deactivate Information System Access Codes

This form must be hand carried to Information Integration & Implementation Branch, (IM-I).

Deactivate Password/Security for:

First name _____

Mid. Initial _____

Last name _____

Office Routing symbol _____

User ID's recorded for termination _____

SMARTCARD:

Smart Card returned..... Yes No N/A

TELEPHONE ACTION:

Telephone Number _____ Voice Mail Code _____

Telephone calling card returned Yes No N/A

Disconnect Telephone Yes No N/A

Remove Name from Directory Yes No N/A

Systems used - check all that applies:

- LAN CEFMS RAMS RMS/INCOME
 E-MAIL SPS/SAACONS PPI
 OTHER(S) _____

Your sign-on, and all related access codes, files/data will be deleted from remote and local computer systems.

Effective Date of Action: _____
Supervisors Signature / Date _____

Deactivate Information System Access Codes

This form must be hand carried to Information Integration & Implementation Branch, (IM-I).

Deactivate Password/Security for:

First name _____

Mid. Initial _____

Last name _____

Office Routing symbol _____

User ID's recorded for termination _____

SMARTCARD:

Smart Card returned.....Yes No N/A

TELEPHONE ACTION:

Telephone Number _____ Voice Mail Code _____

Telephone calling card returned.....Yes No N/A

Disconnect TelephoneYes No N/A

Remove Name from DirectoryYes No N/A

Systems used - check all that applies:

- LAN CEFMS RAMS RMS/INCOME
- E-MAIL SPS/SAACONS PPI
- OTHER(S) _____

Your sign-on, and all related access codes, files/data will be deleted from remote and local computer systems.

Effective Date of Action: _____

Supervisors Signature / Date _____