

## **Online Access** Security Agreement Wis. Stat. § 40.07 (1)

Wisconsin Department of Employee Trust Funds

1-877-533-5020 (toll free) Fax 608-266-5801 etf.wi.gov

Please email the completed, signed form to <a href="mailto:ETFSMBEmployerSecurityAccess@etf.wi.gov">ETFSMBEmployerSecurityAccess@etf.wi.gov</a>. Do not mail. (If you cannot email, please fax us at: 608-266-5801.)

Request Type							
Add access for new employee/third-party vendor							
☐ Delete access for existing employee/third-party vendor							
☐ Change access for existing employee/third-party vendor							
☐ Name change for existing employee/third-party vendor Former name:							
Employee/Vendor Information Read Page 2 and complete information below.							
I have read the provisions set forth on Page 2 of this form. I understand that Wisconsin Statutes, § 943.70 provide criminal penalties for offenses against computer data and programs. Violation of this provision will result in termination of my online access to member accounts and/or termination of my employer's online access to member accounts.							
Employee name (first, middle, last)							
Vendor name (if applicable)							
Work address							
IAM login ID			Work email address				
Employee or vendor signature			Work telephone		Date (MM/DD/CCYY)		
ETF Use Only: Security Administrator							
Logon ID	ETF security administrator signature			Da	ate (MM/DD/CCYY)		
<b>Employer Agent</b> Check all applications for which this individual should be authorized.  If this is a request for additional system access, also check systems this employee previously had (and should continue to have) access to. <b>Notify ETF immediately if an authorized employee terminates or loses authorization.</b>							
WRS  (ETF Web Applications for Employers)  ☐ WRS Previous Service & Benefit Inquiry  ☐ WRS Contribution Remittance ☐ WRS Account Update  This will also grant access to WRS  Transaction Upload, WRS Earnings  Reports (On-going), and WRS  Earnings Reconciliation Reports (Final).		Insurance (myETF Benefits)  ☐ ICI premium payment  Health Eligibility (check one) ☐ read only ☐ full access  Health Premium (check one) ☐ read only ☐ full access  STAR Agencies Only (check one) ☐ Health full access (STAR superuser) ☐ Health read only access (STAR agencies)		Sick Leave (myETF Benefits)  State Employers Only  Accumulated Sick Leave (check one)  full-submit to ETF  restricted-submit for review			

Employer agent must sign on Page 2.

Employer Agent						
I understand that Wisconsin Statutes, § 943.395, provide criminal penalties for knowingly making false or fraudulent claims on this form and hereby certify that, to the best of my knowledge and belief, the above information is true and correct. I certify that I am responsible for reporting information to the Wisconsin Retirement System, and that the above employee/vendor is authorized to gain access to online accounts.						
Employer name						
Employer ETF ID (0001999 for STAR superusers)	Is your agency a STAR agency? ☐ Yes ☐ No					
Employer agent name		Telephone				
		( )				
Employer agent signature	Date (MM/DD/CCYY)					

## **Online Access Security Agreement**

I understand that security measures have been established to provide necessary inquiry and update abilities for the Wisconsin Retirement System and other Department of Employee Trust Funds-administered benefit programs. I agree to maintain the confidentiality of all information that I obtain through online access to participant accounts. I understand that information in these accounts is not a public record and disclosure to any person or organization is absolutely prohibited. A new *Online Access Security Agreement* (ET-8928) will be required for new or additional system access requests.

I further understand that the online networks and Access Management (IAM) is intended for use by employers and vendors to administer WRS and other ETF-administered benefit programs and is not intended to provide information to members or to assist members in making retirement or other benefit decisions. I also understand that the Previous Service and Benefit Inquiry Application is not intended to provide complete information to make important decisions regarding a member's WRS benefits.

ETF will issue each designated employee a logon ID and password to gain access to the system.