OM/PA TICKET REQUEST GUIDE

JOB AID GN-9

GN

The purpose of this job aid is to provide agencies templates of the required information for some of the most frequent Organizational Management and Personnel Administration ticket requests. This job aid also includes some helpful tips to facilitate ticket processing.

Helpful ticket tips

- Requestor's name and PERNR required for all ticket requests.
- All actions over 60 days must be worked by Best Shared Services.
    - All action PCRs must include notes as defined on the Action Notes Template.
- Only Best Shared Services can delete actions.
- Only Best Shared Services can insert actions.
- Name, SSN, DOB Changes: include proper documentation. (Refer to OSC Form: Name Change Cover Sheet).
    - If you are submitting an SSN correction request, include the reason for the error.
    - Only approved HR representatives from DPS can submit these forms.
- Service Calculation: be sure all service is represented on the LOS form and it is signed by the agency and employee.
- System or PCR issues: include screenshots of error message if applicable.

Required ticket information for most common ticket requests

REQUEST FOR BSS TO WORK AN ACTION

Requestor's Name and PERNR:	
Subject employee's name and PERNR:	
Action type and reason:	
Effective Date:	
Approved PCR Number:	
Reason for ticket request:	

REQUEST FOR BEST SHARED SERVICES TO DELETE AN ACTION

Requestor's Name and PERNR:	
Subject employee's name and PERNR:	
Action type and reason:	
Effective Date:	
Reason for ticket request:	

PA- MONTHLY/BIWEEKLY

Requestor's Name and PERNR:	
Subject employee's name and PERNR:	
Effective Date:	
PCR Number:	
Work Schedule Rule:	
Working Week:	
Hours per week if PT:	
Confirmation from agency that everything is closed out on their end:	

PA – WORKFLOW SUBSTITUTION (ACCESS TO ANOTHER USERS INBOX)

Requestor's Name and PERNR:	
Name and PERNR of subject employee:	
Name and PERNR of employee to receive substitution:	
Timeframe (No more than 30 days):	

BOBJ TICKET INFO

Requestor's Name and PERNR:	
Report Name:	
Description of problem:	
What information are you entering in the Prompts box before running the report?	
Screenshots of problem/error messages if possible.	