



Cardinal Security Job Aid

Instructions for the Interface Account Request

Interface Account Request

The Agency Requestor (i.e. technical contact) submits an Interface Account Request Form (Cardinal SE-SW-002) to the Cardinal Interface team to establish an account granting agency/system access in Cardinal to upload files and retrieve data extracts.

Once the form is complete and signed by the agency Fiscal Officer, the Agency Requestor should:

1. Create a Virginia Customer Care Center (VCCC) Helpdesk ticket by sending an email to vccc@vita.virginia.gov, using the subject "Cardinal Interface Account Request Form".
2. Attach the Cardinal Interface Account Request Form to the VCCC helpdesk ticket.
3. The Cardinal Interface team will contact the Agency Requestor once the Cardinal Interface account setup is complete

Interfacing Entity Section

Interfacing Entity (select only one)	
<input type="checkbox"/> 1 State Agency	<input type="checkbox"/> 2 Central System*
	*System Name (required when "Central System" is checked as the interfacing entity):
	<input type="checkbox"/> 2

Choose only one in this section:

1. **State Agency** – Check this box if you are representing a state agency and would like to exchange the data with Cardinal through agency interfaces such as Employee Data Upload/Extract, Payroll Data Extract, etc.
2. **Central System** – Check this box if you are representing a central system that consists of data for all state agencies and would like to access Cardinal file server to upload or retrieve the interface files. Examples of central systems include PMIS, SWAM, REDI Virginia, Data Point, etc. If you choose "Central System" as the interfacing entity, also provide the name of the system you are representing.

If your agency has both agency and central system interfaces with Cardinal, you are required to submit two separate forms:

- a) As a "State Agency" to exchange agency interface files
- b) As a "Central System" to exchange central system interface files

If your agency owns more than one central system, and if you wish to use Cardinal file server for all these interfaces, you must submit separate requests for each central system.



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Cardinal Application Section

Cardinal Application (select only one)	
① Financials (FIN)	② Human Capital Management (HCM)

Choose only one action in this section:

1. **Financials (FIN)** – Check this box if the interface account request is related to the Cardinal Financials (FIN) application.
2. **Human Capital Management (HCM)** – Check this box if the interface account request is related to the Cardinal Human Capital Management (HCM) application.

If your agency's request is related to both FIN and HCM, you are required to submit two separate forms:

- a) With Financials (FIN) checked
- b) With Human Capital Management (HCM) checked

Action Requested Section

Action Requested (select only one)		
① New Account	② Update Existing	③ Disable Account

Choose only one action in this section:

1. **New Account** – Check this box to create a new interface account in Cardinal for your agency/system.
2. **Update Existing** – Check this box to update the contact information, file transfer protocol, or to reset the password for your account. When this action is selected, it is mandatory to enter the agency interface account and the data being requested to be updated in the "Additional Comments" section. For example, if Agency 123 has two interface accounts (i.e., 12300 and 12300_02), and the password needs to be reset for the account 12300_02, the following must be entered in "Additional Comments" section: "Reset the password for the account 12300_02".
3. **Disable Account** – Check this box if the agency/system will no longer exchange interface files with Cardinal. When this action is selected, it is mandatory to enter the agency interface account(s) that need to be disabled in the "Additional Comments" section.



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Contact Information Section

This section is to gather the contact information of the technical resource from the agency to communicate the Cardinal file server and the account information to during the initial setup. The contact information may also be used to communicate file transfer issues or system outage notifications. Agencies are required to submit an updated Interface Account Request form when the contact information changes.

Contact Information					
First Name:	①	MI:	①	Last Name:	①
Email Address:	②			Phone Number:	③
Business Unit (5 digits):	④				

1. **Contact Name** – Name of the technical resource.
2. **Email Address** – The technical resource’s agency email address.
3. **Phone Number** – The number where the technical resource can be reached.
4. **Business Unit** – The 5-digit official state business unit or, in case of a Central System, the business unit of the agency owning the system. An agency that interfaces data for multiple agencies should provide the business unit of the submitting agency.

Interface Protocol Information Section

Interface Protocol Information
① SSH File Transfer (SFTP)

Cardinal accepts only the following secured interface connections:

1. **SSH File Transfer** – Commonly known as SFTP; Cardinal provides the ability to perform file transmission using SSH keys instead of the password.



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Requestor Signature Section

Signatures / Approvals	
<i>I, the Requestor, certify that I am authorized to set up secure file transmissions on behalf of my agency/system. I accept the responsibility to protect the Cardinal system credentials and the data retrieved from the Cardinal application pursuant to SEC501 and other applicable Commonwealth of Virginia security policies and local, state, and federal laws. I understand that if I abuse my access or compromise security, the access will be terminated without prior notification.</i>	
①	②
Requestor Signature	Date
③	
Requestor Name	
④	
Requestor Job Title	

- Requestor Signature** – The signature of the person who is requesting the Cardinal interface account. Note: Typically, the Requestor will be the technical resource for the submitting agency that will be responsible for configuring the FTP client software to establish the connectivity with the Cardinal file server. Any other person submitting this form should be responsible for managing the data transmission between the agency and the Cardinal application.
- Date** – Date when the form was submitted for approval in MM/DD/YYYY format.
- Requestor Name** – Name of the Requestor in <First Name> <MI> <Last Name> format.
- Requestor Job Title** – Job title of the Requestor (e.g., Technical Architect, Technical Analyst).

Approver Section

<i>I, the Fiscal Officer, have reviewed the information provided above and am approving the request to create an account in the Cardinal interface application. I have verified that the user requesting the Cardinal interface account understands and accepts the responsibilities for securing the credentials and the data received using this account.</i>	
①	②
Fiscal Officer (FO) Signature	Date
③	
Fiscal Officer (FO) Name	

Cardinal requires the interface account request to be approved by the Fiscal Officer (FO) of the state agency or the agency owning the central system.

- Fiscal Officer Signature** – The signature of the Fiscal Officer approving the request.
- Date** – Date when the form was approved by the Fiscal Officer in MM/DD/YYYY format.
- Fiscal Officer Name** – Name of the Fiscal Officer in <First Name> <MI> <Last Name> format.



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Additional Comments Section

*Additional Comments:
(required when "Update Existing" or "Disable Account" is selected as action requested)



1. Enter comments that would be helpful for the Cardinal Security team in processing the Interface Account Request. This is a required field when "Update Existing" or "Disable Account" is selected in the Action Requested Section.