PELICAN data is protected by the same security protocols as other programs such as Medical Assistance and Income Maintenance. These protocols require secure and encrypted servers that are tested for vulnerabilities, unique user names with strong passwords, and user roles that are assigned specific security levels and access. Please review the Tips for PELICAN User Role Requests to ensure you are requesting appropriate security access for the activities you need to perform with in the PELICAN system.

To request Commonwealth Business Partner User-Access for PELICAN, please review the following documents.

1. This document contains two parts.
   A. Commonwealth Business Partner Account Request/Approval Form - INSTRUCTION FOR COMPLETING THE FORM and INSTRUCTION FOR ASSIGNING SECURITY ROLES [note: current Fax number 717.334.6921]
   B. PELICAN Account Request – form for requesting username and or requesting changes to existing PELICAN username [note: current Fax number 717.334.6921]

2. All New PELICAN User Account requests must include:
   A. PELICAN User Account Request form [completed in its entirety]

3. Providers with a Provider Self Service ID from COMPASS can have that ID updated with additional security access to PELICAN for use in data entry for PA Pre-K Counts, Head Start and STARs program

4. PELICAN users requiring changes to their type of access or changes to the locations they currently access, must include their existing PELICAN username [B-xxxxxxx].

5. Please be sure the form information is complete and legible

6. Fax all forms to : 717.334.6921

7. For questions about the forms please call the ELN Help Desk at 877.491.3818

Thank you!

Updated 6/24/2012  [V5]
Tips for PELICAN User Role Requests

1. **Pre-K Counts User Role – Lead Agency**
   This type of role allows for a user to have the Location/Service Site abilities in addition to financial access for creating and updating budgets. Budgets can be accessed at two different levels. Please note the choices below. [A, B]
   This type of user has access to: Grant Structure, Grant Information, Program Review Instrument, Slot Maintenance, Quarterly Narrative, Waivers, and Enrollment Plan
   
   A. Choose ‘Lead Agency’ - if financial access is needed to all Direct Service Locations and Partner Locations for a specific Lead Agency
      1) Use the Lead Agency’s 9 digit MPI ID and FEIN
   
   B. Choose ‘Lead Agency’ - if financial access is needed at the Partner Location(s) and for any Partner service locations
      1) Use the Partner’s Location 9 digit MPI ID and FEIN

2. **Pre-K Counts User Role - Location/Service Site**
   This type of role allows a user to update Child, Staff and Classroom information for specific location(s)
   This type of user has access to: Location Information, Staff, 3&4 Year olds, Attendance, Benefits, Funding Information, Child Roster, Child Search, and Waiting List
   
   A. Choose Location/Service Site to add, delete or update children, staff or classrooms, enter attendance etc
      1) Use the Location’s 4 digit ID [note- this access is for a specific location, if the user needs multiple locations under the same lead Agency, all 13 digit MPI IDs must be noted]

3. **ELN User Role – Legal Entity**
   This type of role allows a user update access all ELN program information for all locations/service sites within the FEIN/Tax ID.
   This type of user access can be specific to one or several ELN programs. Chose the ELN program(s) information that is applicable. [Head Start, Keystone STARS]
   Use the 9 digit MPI ID or the FEIN/Tax ID for the Legal Entity

4. **ELN User role - ELN Location/Service Site**
   This type of role allows a user update access for specific locations(s)
   A. Chose the 13 digit MPI ID or FEIN/Tax ID for the specific

5. **SLDS Data Upload –**
This role can be requested for existing PELICAN Users who also participate in Federal Head Start and would like to upload some basic child data about their Federal Head Start children through their existing access.
**COMMONWEALTH BUSINESS PARTNER User-Access**  
**PELICAN ACCOUNT REQUEST FORM**  

**INSTRUCTION FOR COMPLETING THE FORM**

**Business Partner Access** is defined as the communication and interaction of approved persons to enter (access) commonwealth Information Technology (IT) resources from a non-commonwealth site via either dialup or a hard circuit connection.

This access right is a **privilege** given to selected, approved, and authorized business partners (Contractors, Benefit Provider, Vendor) for the expressed purpose of transacting commonwealth related activity and functions.

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<table>
<thead>
<tr>
<th>Information Requested:</th>
<th>Explanation:</th>
</tr>
</thead>
</table>
| Requestor’s Name, Email, Telephone number     | The full name  
The unique email address  
The phone number, **including area code** of the individual requesting access |
| New User                                      | Indicates requestor does not have a PELICAN user ID                          |
| Change for existing user                      | Indicates requestor needs an access change to an existing ID                 |
| Requestor’s existing PELICAN Username        | Record current b- xxxxx ID                                                  |
| Provider Self Service ID                      | If the requestor has a PSS ID for accessing provider information through COMPASS, that ID can be updated to include PELICAN access. Two different URLs would be used but the ID and password would be the same. |
| Pre-K Counts User Role                        | Choose a user role that applies to the programs the requestor needs access for |
| Head Start User Role                          |                                                                             |
| ELN/STARs User Role                           |                                                                             |
| Lead Agency User Role                         | For PA Pre-K Counts and Head Start programs  
This role includes the location role access and also allows access to Financial Management for the Lead Agency  
Please refer to the definitions of roles on the next page |
| Location/Service site role                    | For any type of program  
This role is user access for one or |

Instructions for completing request - June 1, 2012

1
more locations. Provides the ability to update location information. I.E. Classrooms, Children and staff, by program. Please refer to the definitions of roles on the next page.

| Legal Entity Role | For ELN STAR programs  
| For ELN STAR programs  
| This role includes location role access.  
| In addition, this role provides access to all direct service sites associated with the Legal Entity.  
| Please refer to the definitions of roles on the next page. |

| Lead Agency Name / Legal Entity Name | Lead Agency or Legal Entity associated with the person requesting access. |
| Lead Agency / Legal Entity Address City, State, Zip | Full address of the Lead Agency / Legal Entity. |
| FEIN (Tax ID) | The tax ID (FEIN or SSN) for the Lead Agency or Legal Entity. |
| Lead Agency or Legal Entity MPI number | 9 digit MPI number assigned to Lead Agency or Legal Entity |
| Location/Service Site Name | When requesting Location/Service Site role access:  
| Complete the name of the location where the person performs their day-to-day activities.  
| If additional Location/Service Sites are needed for this user, please note all on the form |
| Location MPI | 13 digit MPI number  
| The first 9 digits is the Lead Agency/Legal Entity MPI, the last 4 designate the specific location |
| State Longitudinal Data System [SLDS] | This role can be requested for existing PELICAN Users who also participate in Federal Head Start and would like to upload some basic child data about their Federal Head Start children through their existing access. |
| Approving Site Manager/Specialist Signature | An individual at the Lead Agency/Legal Entity must sign this form to approve access for the requestor. |
| Phone Number | Approving managers telephone number |
| Date Submitted | Date that form was faxed |
### INSTRUCTION FOR ASSIGNING SECURITY ROLES

<table>
<thead>
<tr>
<th>PELICAN User Role</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pre-K Counts User Role - Lead Agency</strong></td>
<td>This role allows access to all locations/service sites within the Lead Agency for the current Fiscal year, includes access to Financial Management.</td>
</tr>
<tr>
<td></td>
<td>This role allows a user to have the Location level abilities [update location information, Classrooms, Children and Staff]</td>
</tr>
<tr>
<td></td>
<td>Requestors needing access to Financial Management, budget documents for Pre-K Counts should be assigned this role.</td>
</tr>
<tr>
<td></td>
<td>This type of user has access to: Grant Structure, Grant Information, and Program Review Instrument, Slot Maintenance, Quarterly Narrative, Waivers, and Enrollment Plan.</td>
</tr>
<tr>
<td></td>
<td>Budgets can be accessed at two different levels. Please note the choices below. [A, B]</td>
</tr>
<tr>
<td>A. Choose Pre-K Counts and/or Head Start ‘Lead Agency’ - if access is needed for Lead Agency Financial Management documents and location level abilities for the current fiscal year.</td>
<td>• Use the Lead Agency’s FEIN and MPI number.</td>
</tr>
<tr>
<td>B. If the requestor is a Partner in a Pre-K Counts or Head Start budget and has direct locations and/or other Partners - Choose ‘Lead Agency’. If access is needed at the Partner Location for Financial Management documents and for any direct service locations to update location information, Classrooms, Children and Staff</td>
<td>• Use the Partner’s FEIN and MPI Number</td>
</tr>
</tbody>
</table>

<p>| <strong>Head Start User Role - Lead Agency</strong> | This role allows access to all locations/service sites within the Lead Agency for the current Fiscal year, includes access to Financial Management. |</p>
<table>
<thead>
<tr>
<th>Role Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Location/Service Site Role</strong> – Pre-K Counts, Head Start and ELN STARS</td>
<td>For ELN STARS - this type of role allows a user to add, delete or update Child, Staff and Classroom information for specific location(s). For PKC and Head Start – allows this type of user to add, delete or update Child, Staff and Classroom information for specific location(s). and provides access to: Location Information, 3&amp;4 Year olds, Attendance, Benefits, current Fiscal Year Grant ID/Funding Information, Child Roster, Child Search, and Waiting List. A. Chose Location/Service Site to add, delete or update children, staff or classrooms, enter attendance etc. • Use the Location’s 13 digit MPI ID [note- this access is for a specific location. If the user needs multiple locations under the same lead Agency, all 13 digit MPI IDs must be...</td>
</tr>
<tr>
<td><strong>ELN/STARs Provider User Role – Legal Entity role</strong></td>
<td>This type of role allows a user update access to all ELN STARS program information for all direct locations/service sites within the FEIN/Tax ID/ MPI. This type of user access can be specific to one or several ELN programs. • Use the Legal Entity FEIN/Tax ID and/or the 9 digit MPI number.</td>
</tr>
<tr>
<td><strong>This role allows a user to have the Location level abilities [update location information, Classrooms, Children and Staff]</strong></td>
<td>Requestors needing access to Financial Management, budget documents for Head Start should be assigned this role. This type of user has access to: Grant Structure, Grant Information, and Program Review Instrument, Slot Maintenance, Quarterly Narrative. Choose Head Start ‘Lead Agency’ - if access is needed for Lead Agency Financial Management documents and location level abilities for the current fiscal year. • Use the Lead Agency’s FEIN and MPI number.</td>
</tr>
</tbody>
</table>

**Instructions for completing request - June 1, 2012**
<table>
<thead>
<tr>
<th>Users needing multiple security roles and programs</th>
<th>noted</th>
</tr>
</thead>
<tbody>
<tr>
<td>If needed check multiple user roles</td>
<td></td>
</tr>
<tr>
<td>Examples of multiple roles at Lead Agency/Legal Entity level</td>
<td></td>
</tr>
<tr>
<td>1) Pre-K Counts Lead Agency and Head Start Lead Agency</td>
<td></td>
</tr>
<tr>
<td>2) Pre-K Counts Lead Agency, Head Start Lead Agency and ELN/STARs Legal Entity</td>
<td></td>
</tr>
<tr>
<td>3) Head Start Lead Agency and ELN/STARs Legal Entity</td>
<td></td>
</tr>
<tr>
<td>4) Pre-K Counts Lead Agency and ELN/STARs Legal Entity</td>
<td></td>
</tr>
<tr>
<td>Examples at a Location Level</td>
<td></td>
</tr>
<tr>
<td>5) Location users can have multiple locations listed and multiple programs for updating Child, Staff and Classroom information</td>
<td></td>
</tr>
</tbody>
</table>

**Completed Forms:** Completed forms must be mailed or faxed to:

PELICAN-ELN Access Request  
Office of Child Development & Early Learning  
Departments of Education and Public Welfare  
333 Market Street, 6th floor  
Harrisburg, PA 17126-2675

**Fax:** 717-334-6921 or 717-787-1529

Completed forms are retained by OCDEL for audits and verification.

**Deletions:** Requests for account deletion must be mailed or faxed to OCDEL
Commonwealth Business Partner User-Access
PELICAN ACCOUNT REQUEST
PROGRAM OFFICE: Office of Child Development and Early Learning

Requestor’s Name: _____________________________________________
Requestor’s unique email: __________________________ Requestor’s Phone: ______________

*** If you have an existing Provider Self Service ID, please note that security access to PELICAN for PKC/HIS/STARs can be added to that ID used for PSS. PSS ID b-______________________________

This is a request for: New user___ [does not have a b-xxxxx ID]  

Change for existing user ___ Requestor’s existing username (if applicable): b- ________________________

Pre-K Counts User Role Requested (Select ONLY ONE – Lead Agency or Location role)

☐ Lead Agency role: access to only PKC locations/service sites within the LA for current Fiscal Year, includes Financial Management access.
☐ Location/Service Site role: access to the specific location(s)/service site(s) for PKC only

Lead Agency Name: _____________________________________________
Lead Agency Address: ____________________________________________ City: _______________ PA Zip code: ____
Lead Agency’s FEIN (Tax ID) _____________ Lead Agency’s 9 digit MPI number__________________________

Location/Service Site users must also complete the following.
Location/Service Site Name: _______________________________________
Location Address: _____________________________________________ City: ____________________________
County ______________ State: PA Zip code: ______ Location 13-digit MPI ________________________________
List additional location site MPI IDs requested: ________________________________

Head Start User Role Requested (Select ONLY ONE - Lead Agency or Location role)

☐ Lead Agency: access to all Head Start locations/service sites within the LA for current Fiscal Year, includes Financial Management access.
☐ Location/Service Site: access to the specific location(s)/service site(s) for HS only

Lead Agency Name: _____________________________________________
Lead Agency Address: ____________________________________________ City: _______________ PA Zip code: ____
Lead Agency’s FEIN (Tax ID) _____________ Lead Agency’s 9 digit MPI number__________________________

Location/Service Site users must also complete the following.
Location/Service Site Name: _______________________________________
Location Address: _____________________________________________ City: ____________________________
County ______________ State: PA Zip code: ______ Location 13-digit MPI ________________________________
List additional location site MPIs requested: ________________________________

ELN/STARS User Role Requested (Select ONLY ONE – Legal Entity or Location role)

☐ Legal Entity role: access to all direct locations/service sites under the FEIN/ Legal Entity MPI
☐ Location/Service Site role: access to the specific location(s)/service site(s) requested.

Legal Entity Name: _____________________________________________
Legal Entity Address: ____________________________________________ City: ____________________________
County ______________ State: PA Zip code: _______________________
Legal Entity’s FEIN (Tax ID) _____________ Legal Entity’s 9-digit MPI ________________________________
Location/Service Site users must also complete the following.
Location/Service Site Name: __________________________________________
Location Address: ___________________________________________ City: __________________________
County ______ State: PA Zip code: ________________
Location 13-digit MPI __________________________________________
List additional location site MPIs requested: ________________________________

Specify the program information you need to work with under the user role you are requesting:

- [ ] PA Pre-K Counts  
- [ ] Head Start [Early or Pre-School]  
- [ ] Keystone STARS

**SLDS Data Upload** - for Federal Head Start providers – existing B-xxxxx user ID ____________
Legal Entity Name: __________________________________________
Legal Entity Address: __________________________________________ City: __________________________
County ______ State: PA Zip code: ________________
Legal Entity’s FEIN (Tax ID) ____________ Legal Entity’s 9-digit MPI ________________

Location/Service Site users must also complete the following.
Location/Service Site Name: __________________________________________
Location Address: ___________________________________________ City: __________________________
County ______ State: PA Zip code: ________________
Location 13-digit MPI __________________________________________
List additional location site MPIs requested: ________________________________

This form must be completed in its entirety. An individual’s unique email must be provided

Approving Site Manager/Specialist Signature ____________________________

Phone Number ( ) __________________ Email: ____________________________

Date Submitted ____________________________

FAX Completed forms to- 717-334-6921 or 717-787-1529