

## FNS-674/FNS-674A Helpful Hints (for FPRS access)

The following helpful hints provide guidance in completing the FNS-674 and FNS-674A, which are required for FPRS access:

### 1. Boxes 4 and 5 are REQUIRED.

- **Box 4** is the email address that you used to sign up for USDA eAuthentication access.
- **Box 5** is your USDA eAuthentication ID.

4. Email john.doe@organization.gov	5. USDA E-Auth ID, (if applicable) 2000000000000000
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The eAuthentication ID is used by FPRS Support to create and/or modify the user's permissions in FPRS. This ID would have been obtained when you went through the eAuthentication process and visited your Local Registration Authority (LRA). The eAuthentication ID needs to be Level 2 before you can register for FPRS access.

2. **Boxes 8 and 9** refer to contract employees and temporary employees. These fields are not required for those seeking access to FPRS.

### 3. Boxes 14 through 18 are REQUIRED. These are the most important for access to FPRS:

- **Box 14** is **System Name**. This must be "FPRS."

14. System Name

- **Box 15** is **Type of Access**. This is the access level within FPRS that you need –“View” if you will only be viewing data, “Data Entry” if you are entering report data, “Certify” if you are responsible for Certifying the data that has been entered by someone else. Each agency will need someone with Certify rights. “Post” rights are reserved for FNS Regional or HQ Grants or Budget staff, which allows the user to Post certified submissions from state and local agencies. State level users will not be granted Post rights within FPRS.

15. Type of Access

- **Box 16** is **Form**. This refers to the actual form(s) you will be submitting in FPRS (e.g., “SF-425”). It is helpful to include the program (grant) name if the user is requesting only one program. In the case of SNAP-PART, for example, the user should put “SNAP-PART/SF-425” in **Box 16**. If the user is requesting multiple programs/grants, the user should use the FNS-674A for the Program Name and Form (see below). The program name should match the one being used in FPRS. If there are any questions about what the program name is in FPRS, contact your FNS Regional

Office or HQ Grants Management for further assistance. You must ONLY request access to programs and forms for your agency.

16. Form (applicable for FPRS)

SNAP-PART/SF-425

- **Box 17 is Action Requested.** If you are an existing FPRS user, indicate 'Modify'. If you are new to FPRS, indicate 'Add'.

17. Action Requested

Modify

- **Box 18 is State/Locality Codes.** This is the 7-digit (or in some cases, a 10-digit) code for the state or local agency that you are representing (e.g. **5191501** – VA Department of Education). The code is extremely important because it is tied to the agency you will be selecting to report on once you start using FPRS. It is also required by FPRS Support to create or modify your account.

18. State/Locality Codes

5191501

4. **Boxes 19, 20, and 21** are not used by FPRS and should be left blank.

5. **Box 23 is REQUIRED.** This needs to be signed and dated by you. Also, the printed name must be legible or the request will be returned to the FNS regional office.

23. User Acknowledgement (Users requesting system access must read, sign and date prior to submitting this form)

- I have read and understand the Privacy Act Statement and the FNCS Rules of Behavior (see page 2 for complete verbiage)
- Decisions in personnel matters involving disciplinary action will be based on the assumption that I am familiar with the security requirements presented in these rules and I am aware of my obligation to abide by them.
- I understand that systems require security to protect user and system files from unauthorized access.
- I have completed this form to the best of my abilities.

John Doe  
User Signature

John Doe  
Print Name

11/29/2013  
Date

6. **Box 24 is REQUIRED.** There are four signature blocks.

- **Line (a) Supervisor.** This signature **must** be included before submitting access forms to your FNS-Regional Office.

24. a. Supervisor

Print Name Agency Supervisor

Phone Number (000) 000-0000 Date 11/29/2013

Approve

Deny

Signature

Agency Supervisor

- **Line (b) FNS Authorizing Officials** will be completed by your regional Authorizing Official after you submit the access forms to your FNS Regional Office.
- **Line (c) Information Security Office** will be completed by the Information Security Office.
- **Line (d) State Computer Security Officer does not apply to FPRS.**

**7. FNS-674A** should be used when you are requesting access to multiple programs.

- You **MUST** select the correct Program(s)/Form(s) that you need rights to. It is very important that you only request access to the programs and forms that your agency participates in. If you are not sure what they are, contact your local supervisor or your FNS Regional Office Authorizing Official. See below for an example of a user requesting access to CN/FNS-10, FNS-44 and FNS-418.

Program	Form(s)	Agency Code(s) <i>(Agency Code(s) MUST be included in order to grant access to State users)</i>	Access Restrictions	Access Rights <i>(Check Only ONE Per Row)</i>			
				View	Data Entry	Certify	Post
<input checked="" type="checkbox"/> CN	FNS-10	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FNS-44	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-418	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-777			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FNS-777 SAE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	QTR-SFA-CERT			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SF-269 (CN)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SF-269 (CN) SAE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

- You **MUST** include the 7-digit (state ID) or 10-digit (locality ID) Agency ID code in the **Agency Code(s)** column for each program/form you are requesting access to. See below for an example.

Program	Form(s)	Agency Code(s) <i>(Agency Code(s) MUST be included in order to grant access to State users)</i>	Access Restrictions	Access Rights <i>(Check Only ONE Per Row)</i>			
				View	Data Entry	Certify	Post
<input checked="" type="checkbox"/> CN	FNS-10	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FNS-44	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-418	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-777			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FNS-777 SAE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	QTR-SFA-CERT			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SF-269 (CN)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SF-269 (CN) SAE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

- You **MUST** check the appropriate box for the program/form level of permission (View, Data Entry, Certify or Post) that you require. **Note:** Post rights are reserved for FNS Regional and HQ users. See below for an example.

Program	Form(s)	Agency Code(s) <i>(Agency Code(s) MUST be included in order to grant access to State users)</i>	Access Restrictions	Access Rights <i>(Check Only ONE Per Row)</i>			
				View	Data Entry	Certify	Post
<input checked="" type="checkbox"/> CN	FNS-10	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-13			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FNS-44	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-418	0191501		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FNS-777			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	FNS-777 SAE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	QTR-SFA-CERT			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SF-269 (CN)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SF-269 (CN) SAE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- Two forms (CSFP/FNS-191 and SNAP-ED/FNS-759) require a 10-digit locality code when requesting rights to those forms. See below for an example of a user requesting rights to the SNAP-ED/FNS-759.

Program	Form(s)	Agency Code(s) <i>(Agency Code(s) MUST be included in order to grant access to State users)</i>	Access Restrictions	Access Rights <i>(Check Only ONE Per Row)</i>			
				View	Data Entry	Certify	Post
<input checked="" type="checkbox"/> SNAP-ED	FNS-759	0692501001, 0692501002		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SF-425			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you requesting rights to many agencies, they can be indented in the following format (that includes the 7-digit root state ID with the relevant 3-digit extensions indicated separately:

Program	Form(s)	Agency Code(s) <i>(Agency Code(s) MUST be included in order to grant access to State users)</i>	Access Restrictions	Access Rights <i>(Check Only ONE Per Row)</i>			
				View	Data Entry	Certify	Post
<input checked="" type="checkbox"/> SNAP-ED	FNS-759	0692501 - 001, 002		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SF-425			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SNAP-FARM	SF-425			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Once you have completed these forms, including the required signatures, submit them to your FNS Regional Office for processing. Please receive confirmation from the eAuthentication Help Desk that you have Level 2 eAuthentication access prior to submitting these documents to your regional office. The eAuthentication Help Desk can be reached at [AuthHelpDesk@ftc.usda.gov](mailto:AuthHelpDesk@ftc.usda.gov) or by phone at (800) 457-3642.

Please contact your FNS Regional Office Authorizing Official for any additional questions you have about the FPRS registration process. Following is a list of the current FNS Regional Authorizing Officials: