



# Office of Children and Family Services

ANDREW M. CUOMO  
Governor

SHEILA J. POOLE  
Acting Commissioner

## CONNECTIONS Operational Data Store (ODS) Onboarding Request

District/Agency/Entity Name:

### Commissioner/Executive Director Details

\*Please provide Commissioner/Executive Director details for the requesting District/Agency/Entity.

Name:	Title:
Email Address:	
Telephone:	Ext:

### Data Warehouse Coordinator/Technical Contact Details

\*Please provide Data Warehouse Coordinator/Technical Contact details.

Name:	Title:
Email Address:	
Telephone:	Ext:

### CONNECTIONS ODS User Details

\*Please provide details for each user that requires access to the NYS Virtual Desktop Solution for the CONNECTIONS ODS.

Name:	Title:
Email Address:	
Telephone:	Ext:

Name:	Title:
Email Address:	
Telephone:	Ext:

Name:	Title:
Email Address:	
Telephone:	Ext:

Name:	Title:
Email Address:	
Telephone:	Ext:

Name:	Title:
Email Address:	
Telephone:	Ext:

\*Please attach additional sheets if necessary.

Please submit completed forms to [ocfs.sm.sppd.datarequests@ocfs.ny.gov](mailto:ocfs.sm.sppd.datarequests@ocfs.ny.gov).