

## Voya Sponsor Web Access Request Form

The following form will be used to establish, delete, or make changes to access to Voya Sponsor Web/Voya Data Gateway. Only authorized personnel directly involved in payroll uploading and funding should be given access to the Voya applications. This form must be approved and signed by the Business Manager.

Return Instructions:

- Return completed form to Voya Financial at [ID-NewMexicoPayroll@voya.com](mailto:ID-NewMexicoPayroll@voya.com)
- Please allow a minimum of five (5) business days for receipt of registration emails.
  - You will receive two emails from Voya Sponsor Web, one with the registration link and the other with a temporary PIN. Please check your junk and spam folders for these emails.

### **EMPLOYER INFORMATION**

Employer Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip Code

### **AUTHORIZED USER CONTACT INFORMATION**

#### **Authorized User #1:**

Request Type: (Please circle one) New Change Delete

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

#### **Authorized User #2:**

Request Type: (Please circle one) New Change Delete

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

### **APPROVAL SIGNATURE**

Authorized Approver: \_\_\_\_\_

Approver Title: \_\_\_\_\_

Signature and Date: \_\_\_\_\_