

VAX ACCESS REQUEST

PART I - Identification Data

(A) ____ Full-time Staff ____ Part-time Staff ____ Full-time Faculty ____ Adjunct Faculty ____ Student Assistant

(B) Name: _____

(C) Title: _____

(D) Department: _____

(E) Cost Center: _____ (F) Phone: _____

(G) Username (if applicable): _____

PART II - Access Requested

(A) ____ SIS (Student Information System) - Please complete **Request for Password to Access SIS** form from the Registrar's Office (X6740)

(B) ____ FRS (Financial Resource System)

____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit

____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit

(C) ____ HRS (Human Resource System)

____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit

____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit ____ view/edit

(D) ____ E-MAIL VAX

(E) ____ Internet

(F) ____ WORKLOG *Note: Attendance of WORKLOG training session is mandatory.*

(G) ____ Budget Development System - Please complete **Request for Access to Budget Development System** form.

(H) ____ Grant same access as username: _____.

(I) ____ Other (specify): _____

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PART III - Authorization

I agree to abide by the procedures identified by CCCC and that I will not use the data to reproduce an official document. I understand that Computer Services may terminate or subsequently refuse my access to the screens at any time, with or without notification.

(A) _____
Applicant Signature Date

I agree that the employee applicant has an Academic/Administrative need to access the information database and files and I will notify Computer Services immediately in writing should the employee resign, transfer or be terminated by this office.

(B) _____
Supervisor Signature Title Date Approved

(C) _____
FRS System Owner Signature Date

(D) _____
HRS System Owner Signature Date

PART IV - Operations' Use Only

___Approved ___Disapproved Acutal Hours _____ ___New Assignment ___Access Change

Date Received _____ Date Completed _____ Date Notified _____

Operator Number: _____ SIS _____ HRS _____ FRS Username: _____

Computer Services Authorization Signature

Instructions

PART I - Identification Data

- (A) Please indicate your employment status.
- (B) Print your full name.
- (C) Print your job title.
- (D) List the department in which you are employed, i.e. Admissions & Records.
- (E) Give your six-digit cost center number.
- (F) List the CCCC extension at which you can be reached for further information and/or for notification of username and password when assigned.
- (G) If you already have a **current** username and are using this form for access change(s), please list your username, i.e. ZSNPOWLEN.

Instructions, continued

PART II - Access Requested

- (A) *All access to the student records in the SIS (Student Information System) **must** be approved by the Registrar. Please complete **Request for Password to Access SIS** form and return to the Registrar.*
- (B) *To receive access to FRS (Financial Resource System), check the FRS option on the form, and list the screens to which you require access. Indicate for each screen whether you will need to view or edit the information listed on the screen. The signature of the Manager of Accounting and Financial Records is required before System Administrator can grant access.*
- (C) *To receive access to HRS (Human Resource System), check the HRS option on the form, and list the screens to which you require access. Indicate for each screen whether you will need to view or edit the information listed on the screen. The signature of the Director of Human Resources is required before System Administrator can grant access.*
- (D) *If you only require access to VAX to use E-MAIL, fill out PART I - Identification Data, check the E-MAIL VAX option on PART II, sign the form, and obtain your supervisor's signature. No further authorization is required if E-MAIL is the only access requested.*
- (E) *To request access to Internet, fill out PART I - Identification Data, check the E-MAIL VAX and the Internet options on PART II, sign the form, and obtain your supervisor's signature. No further authorization is required if Internet is the only access requested.*
- (F) *Access to WORKLOG, Administrative Programming's on-line work request system, will be granted only after completion of training.*
- (G) *Please complete **Request for Access to Budget Development System** form.*
- (H) *If another employee currently has the **exact** access you require, check the option "Grant same access as username:" option and print that employee's username in the blank provided.*
- (I) *If the access you require is not listed on this form, please check the "Other" option and give detailed information regarding your access needs.*

PART III - Authorization

- (A) *Sign your name and date the form.*
- (B) *Obtain the signature of your supervisor.*
- (C) *The authorization of the FRS system owner (Manager of Accounting and Financial Records) is required for FRS access.*
- (D) *The authorization of the HRS system owner (Director of Human Resources) is required for HRS access.*

Please call System Administrator at extension 6649 with any questions regarding VAX access.