

PEPPERDINE UNIVERSITY

CASHNet Access Application

Request Type: New Modify/Change Inactivate

CASNet User Information: *(All fields are mandatory)*

Name: _____	Network ID: _____
Job title: _____	Extension: _____
Email: _____	Mail Code: _____
Department name: _____	Supervisor: _____

ACCESS TYPES

Reporting/Retrieving *(Check all that apply)*

- Retrieve/Report data for a department
 Retrieve/Report data for following web stores:

Dept. name _____

eMarket / Web Stores *(Check all that apply)*

- Fulfill orders (mail merchandise) Refund transactions

Specify the stores you need access to: _____

Student eRefunds

- Retrieve eRefund customer summary Approve imports

Online Deposit *(Check all that apply)*

- Online deposit for a department Dept. name _____

Cashiering

- | | |
|---|--|
| <input type="checkbox"/> Process voids/refunds in own batch | <input type="checkbox"/> Authorize excess cash back |
| <input type="checkbox"/> Process voids/refunds in all batches | <input type="checkbox"/> Access other users' batches |
| <input type="checkbox"/> Authorize voids | <input type="checkbox"/> Access other users' batches |
| <input type="checkbox"/> Override note restrictions | |

Additional Notes

This statement of responsibility regarding the use of data contained within CASHNet system must be read and agreed to by the end user prior to the granting of access to this system.

By signing this form, I acknowledge that I have read and agreed to adhere to the following statements.

I understand that I will be violating university policies and state and federal law if I gain or help others gain unauthorized access to CASHNet system. I acknowledge that neither I nor anyone else possesses the authority to allow anyone to use my CASHNet Id or password.

I understand that if I violate university policies and state and federal laws by gaining or helping others gain unauthorized access to this system, I will be subject to university disciplinary action and criminal prosecution to the full extent of the law.

By logging on to these computer systems, I acknowledge my responsibility for strictly adhering to university policy and state and federal law. I am also aware that penalties exist for unauthorized access, unauthorized use, or unauthorized distribution of information from CASHNet system.

I agree further not to attempt to circumvent the computer security system nor to attempt to use any transactions, software, computer files, or resources that I am not authorized to use. Any information downloaded from these systems and transported on portable devices (laptops, thumb drives, etc) will be encrypted.

CASHNet User (Signature) *Date*

Supervisor/Manager/Approver (Signature) *Print Name* *Date* *Extension*

Return Completed Form to the Finance Office - Mail Code 4497