

PeopleSoft EPM Access Application

Request	
Action: (please check one) <input type="checkbox"/> New <input type="checkbox"/> Modify/Change <input type="checkbox"/> Inactivate	Date of Request: <input style="width: 80%;" type="text"/>

User Information - To be completed by User	
CWID <input style="width: 80%;" type="text"/>	Name (Last, First MI) <input style="width: 80%;" type="text"/>
Job Title <input style="width: 80%;" type="text"/>	Department <input style="width: 80%;" type="text"/>
Extension <input style="width: 80%;" type="text"/>	Mail Code <input style="width: 80%;" type="text"/>
E-mail Address <input style="width: 80%;" type="text"/>	

Copy User Access:	
Copy roles: CWID to Copy: <input style="width: 80%;" type="text"/>	Verify Name to copy: <input style="width: 80%;" type="text"/>

Access	
<input type="checkbox"/> Query Writer	<input type="checkbox"/> Query Viewer

Functional data needed (check all that applies on an as-needed basis):	
SIS <input type="checkbox"/> Admissions and Records <input type="checkbox"/> Student Accounts <input type="checkbox"/> Financial Aid	HRS <input type="checkbox"/> HR Data <input type="checkbox"/> HR and Pay Check Data

Additional Notes:	

By signing this form, I acknowledge that I have read and agreed to adhere to the PeopleSoft Statement of User Responsibility.		
User Signature:	Date:	Print Name:

Approvals		
Major Area Budget Manager or Vice President Signature:	Date:	Print Name:

SIS access requires Registrar's office approval; HRS access requires Center for Human Resources approval		
Center for Human Resources Approval Signature:	Date:	Print Name:
Registrar's Approval Signature:	Date:	Print Name:

PeopleSoft Security Administrator Signature:	Date:	Print Name:

PEOPLESOFT STATEMENT OF USER RESPONSIBILITY

This statement of responsibility regarding the use of data contained within the PeopleSoft systems for finance, human resources, and student administration must be read and agreed to by the end user prior to the granting of access to those systems.

I understand that I will be violating the University's policies and state and federal law if I gain or help others gain unauthorized access to the PeopleSoft system for finance, human resources, and student administration. I acknowledge that neither I nor anyone else possesses the authority to allow anyone to use my NetworkID or password.

I understand that if I violate the University's policies and state and federal laws by gaining or helping others gain unauthorized access to these systems, 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 these systems.

I agree further not to attempt to circumvent the computer security system or attempting 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.

Print Name:

Signature

Title

Date: