



KENTUCKY STATE UNIVERSITY
Financial Management System
Banner Access Request Form - FINANCE (F) MODULE - REQUISITIONS

Applicant Information
(Please print neatly)

Today's Date:

First Name:

Middle Initial:

Last Name:

Title:

CWID:

Division:

Department:

Email:

Phone:

Supervisor:

Phone:

Status:

- ☐ Faculty ☐ Staff ☐ New Employee ☐ Other
☐ Transfer (From What Department?)

Applicant Acknowledgement:

I understand that all information system accounts assigned to me at the request of my supervisor are to be used only in connection with my assigned duties as an employee of the University and may be revoked upon the request of my supervisor. I understand and accept the following terms and conditions (please check each paragraph):

_____ I understand that passwords are the first line of security on all accounts. I agree not to reveal my passwords nor allow anyone else to use the accounts assigned to me.

_____ I understand that the disclosure of records, documents or other facts containing personally identifiable information about students is prohibited by the Family Education Rights and Privacy Act of 1974. I also understand requests for information about individuals, or requests for lists of individual students, are to be forwarded to the University official responsible for maintaining the information and questions concerning the release of information should be referred to the official. I have read and understand the information provided.

I understand that the accounts assigned to me may provide me with access to sensitive, restricted, or confidential data. I will maintain the confidentiality of any and all data that I retrieve from the information systems in the course of my job duties, including data that I use for reporting purposes or in other software products. I acknowledge that I fully understand the disclosure of information to any unauthorized person could subject me to the criminal and civil penalties imposed by the law.

I further acknowledge that willful misuse of, or unauthorized access to, University information systems also violates the University's policy and could constitute just cause for action by the institution regardless of whether criminal or civil penalties are imposed.

Applicant's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

Please select access requested from one of the following groups based on your intended role:

☐ **Requisition Approver – Budget & Purchasing Access**

☐ **Requisition Creator – Budget & Purchasing Access**

☐ **Other**

Module Manager: _____ Date: _____

If you selected OTHER above, please use the following to list requested forms; staple additional sheet to this form if more space is required. In Access column below, M = Maintenance (Update); Q = Query (Inquiry).

Finance Module	Form Name (7 letters)	Description	Access (M or Q)	Approved By:

ACCOUNT/FOAP ACCESS (IF REQUISITION CREATOR OR APPROVER)

Account Name	FUND CODE	ORGANIZATION CODE	CREATOR OR APPROVER?

PLEASE OBTAIN SIGNATURES ON PAGE 1 AND FORWARD APPROVED FORM TO THE **DIRECTOR OF PURCHASING** LOCATED IN ACADEMIC SERVICES BUILDING SUITE 243. YOU WILL BE NOTIFIED BY APPROPRIATE PERSONNEL ONCE YOUR ACCESS IS ESTABLISHED.

DEPARTMENT	INITIALS	NAME	DATE
INFORMATION TECHNOLOGY			
PURCHASING DEPARTMENT			