

BANNER USER ACCOUNT REQUEST FORM

Employee Name

First _____ *Middle* _____ *Last* _____

WU Telephone # _____ WU E-Mail Address _____

JOB TITLE _____

DIV./DEPT. NAME _____

Employee Signature: _____ Date: _____

EMPLOYMENT STATUS (PLEASE CHECK ONLY ONE)

Full Time Part Time Temporary (Start Date _____ End Date _____) Consultant

Please describe briefly your job function as it relates to Banner. This will help determine the right permissions to grant to your account.

REQUIRED SIGNATURES:

Sign-Off for departments responsible for Banner Forms requested:

Business Office Official _____ Date _____
 A/R Full or A/R Query or Finance Full or Finance Query or Posn Ctrl Full or Posn Ctrl Query
 Requisitions – (After acct. set-up see Eric Brooks in Bus. Office for access to FOAPAL(s) needed)

Student Financial Services Official _____ Date _____
 FinAid Full or FinAid Query

Registrar's Office _____ Date _____
 Student Full or Student Query

Human Resources Office _____ Date _____
 H/R Full or H/R Query

Div./Dept. Supervisor Name: _____

Div./Dept. Supervisor Signature: _____ Date: _____

INFORMATION SYSTEMS USE ONLY:

Assigned Banner Username: _____ Initial Password: _____

Account Enabled Date: _____ Account Disabled Date: _____

Processed by Information Systems:
Date: _____ Name: _____

Signature: _____