

SECURITY ACCESS REQUEST

ACADEMIC YEAR 2011-2012

Employees must first complete new user registration in e-campus. Enrollment Services can grant security access **only** for student records, advising, student financials and financial aid functions.

Send Completed Form To:
Laurie Hebert
University of Rhode Island
Enrollment Services Green Hall
6 Rhody Ram Way
Kingston, RI 02881 USA

Employee Name*: _____ Date: _____
Job Title*: _____ Email: _____

Phone: (401) 874-2522
Fax: (401) 874-7587
Website: www.uri.edu/es

Dept Name*: _____ Emplid*: _____
e-campus User ID*: _____ Phone Number: _____

New User Access _____ Change User Access _____ Delete User Access _____

Model this user's access after (name): _____

Note: If access is modeled after another user, the following box can be left blank.

Describe required access. Please provide details regarding the type of access you are requesting. For example, transcripts, permission numbers, etc.

NEW USER DECLARATION:

I understand that information contained on the e-campus system is CONFIDENTIAL and must only be used in relation to authorized University business.

Signature: _____ Date: _____

This access request requires authorization by your Dean, Department Head, Director or Business Manager.

Authorization: I request that the above person be given the indicated level of access to Peoplesoft Student Administration.

Authorized by: _____ Name (print): _____
Position: _____ Date: _____

Fax or email completed form to: 4-7587 Attention Laurie Hebert
For questions, contact Laurie Hebert at 4-2522 or lhebert@uri.edu

For Enrollment Services Use Only:

Approved by: _____ Date: _____