



### Data System Staff Access Request Form

(Please submit completed form to ITS at Duffie Hall 219 or forward to its@stu.ca)

#### User Information

Name of User: \_\_\_\_\_

Unit: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Access Request Type	Employee Type	Data System (Select all that apply)
<input type="checkbox"/> New User <input type="checkbox"/> Change of Position or Unit <input type="checkbox"/> Add Processes <input type="checkbox"/> Remove Processes <input type="checkbox"/> Terminate Access	<input type="checkbox"/> Permanent <input type="checkbox"/> Casual/ Temporary <input type="checkbox"/> Sessional <input type="checkbox"/> Student Employee	<input type="checkbox"/> Ellucian Colleague <input type="checkbox"/> Entrinsik Informer

#### Details of Access

Provide Security access the same as the following position: \_\_\_\_\_  
 Provide access to the screens/processes listed below  
 Remove access to the screens/processes listed below  
 Other (please specify): \_\_\_\_\_

Access Start Date (YR/MO/DY):		Access End Date (if known):	
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#### Ellucian Colleague Screens or Processes (if known)

Update Access (Change Data)	Inquiry Access (View Data Only)

#### Training Requirements

Has the user received training for any new screens or processes?  Yes  No

If "No," please indicate when the user will be trained (YR/MO/DY):

Previous access is normally terminated immediately when new access is assigned. Is a transition period required for training purposes?  Yes  No

If "Yes," please indicate when previous access should end (YR/MO/DY):

#### Approval

Name of Supervisor:	Signature:	Date: