RF User Access Form

SUNY RF
The Research Foundation for
The State University of New York

User Information Section

New (For administrators: if applicable, name of a person you replaced)

Change (specify date if termination)

Name:

Department:

Email:

User ID:

Location:

The user's signature on this form is acknowledgment that he or she will safeguard the system assets assigned to them and prevent unauthorized use of RF Business Applications

_____   _____

User Authorization   **Date**

Access Request Section

Oracle Business Applications (See Responsibilities List):

Report Center Access Required?

Responsibility:
(Responsibilities can be found here under responsibilities tab)

Security Type:
(Security type can be found in Business Systems Access Administrator Handbook)

   I need access to just the project, tasks, and awards where   is a PI/Key Member

   I need access to award and projects where   is a credit organization

   I need access to award and projects where   is a credit PI

See Detailed Salary Expenditures On: **RF Funded Awards**   **Corporate Funded Awards**

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Access Request Section

I need access to the following:

Awards

Projects

Tasks

Organizations/Departments

Authorization Section

The Department Head/Supervisor/Principal Investigator must sign this form. The individual's signature on this form is authorization to add the user to the computer system and confirmation that the user requires access to The Research Foundation's computer system to perform job duties. This individual will notify the campus security contact of user termination or transfer.

_____   _____

Department Head/Supervisor/Principal Investigator Authorization   **Date**

Additional approvals may be required for specific Oracle responsibilities. See columns H-J of the Responsibilities document and obtain signatures as needed below.

Additional Approval(s) from: **Signature:**   **Additional Approval(s) from:**   **Signature:**