BANNER FINANCE CONTROLLERS OFFICE ACCESS REQUEST
(For controller's office employees)

Name: _____ Phone: _____ CWID: _____ **Date:** _____

Department: _____ Campus Email: _____

****************All above fields must be completed****************

Please check one:

☐ No existing Banner Finance access ☐ Additional Banner Finance access (add to existing access)

☐ Replace Current Banner Finance access ☐ Remove current Banner Finance access

Please check all that apply:

☐ Employee will maintain COA (CM) ☐ Employee will enter journal entries (JVE)

☐ Employee will enter invoices (API) ☐ Employee will run AP checks (APM)

☐ Employee will perform bank reconciliations (BRC) ☐ Employee needs Web Self-Service access

☐ Employee needs other access. Please list access needed: _____

_____

Director/Department Head/Dean: _____ (Please print name)

Director/Department Head/Dean: _____ (Signature)

Employee Signature: _____ ULM Controller Signature: _____

Check Banner instances where security applies: ☐PROD ☐PPRD ☐TEST ☐MOCK