

Banner Finance Security Form

Name:	<input type="text"/>	Middle Initial:	<input type="text"/>
Address/Title:	<input type="text"/>	Phone:	<input type="text"/>
City/State/Zip:	<input type="text"/>	Fax:	<input type="text"/>

Requester: Administrator Student Other – Attach Explanation

Requested

Business Office Use Only			
Oracle ID:	<input type="text"/>	By:	<input type="text"/>
FOMPROF:	<input type="text"/>	By:	<input type="text"/>
Term. Date:	<input type="text"/>	By:	<input type="text"/>

3Dez.293-2 (m) 1210 All Grants for P.I.

Funds for this Org	<input type="text"/>
	<input type="text"/>

Grants for P.I.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="checkbox"/> E-Print	<input type="checkbox"/> Budget Query	<input type="checkbox"/> ID-Search
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Approval

I agree to the following statement:
The University of South Alabama, I may be given access to one or more administrative systems of a confidential nature and I acknowledge it is my responsibility to maintain the confidentiality of such information.
I understand all the requirements and guidelines therein. I understand I am responsible for the proper use of my user identification. I further understand that I will be held accountable for any inappropriate use of my user identification and I will be held accountable for any inappropriate use of my user identification. I further understand that I will be held accountable for any inappropriate use of my user identification and I will be held accountable for any inappropriate use of my user identification.

Department Head Date

Created By Date