

Request for FRS Access**1 Required fields**

Name: _____ Date: _____ Access valid from: _____

Department: _____ Ext: _____ to: _____

*If you have an **EXISTING** account, please complete the following (**NOTE: do NOT give out any passwords**)*

Alpha Username: _____ FRS Operator ID: _____

2a Departmental Users

6-digit account #: _____

OR

Dean Approval - Please print _____ Payroll Access: _____

Signature _____ Vendor Master File Access: _____

2b BAS / Fiscal Services

Template: _____ Payroll Access: _____

Vendor Master File Access: _____

BAS Server: _____
Specify shared
folder access: _____**3 Additional information (optional)****4 Approval**

Dept. Manager: _____ Print name: _____ Date: _____

Fiscal Services AVP: _____ Date: _____

Return to: Fiscal Services - For internal use only

Oracle ID: _____ Username: _____ Operator ID: _____

Org Units: _____

BAS Server ID: _____ Completion Date: _____ Completed By: _____

Confidentiality in HR on file: Yes No

For questions please contact Fiscal Serv. Dept. @ ext. 6030<http://www.csub.edu/bas/fiscal/it/forms/frsaccess.pdf>