TEXAS A&M UNIVERSITY-KINGSVILLE
FAMIS SECURITY
ACCESS REQUEST FORM

FAMIS USERID:_____

Full Name: _____
                              Last   First   Initial

UIN: _____   Date of Birth _____
(Universal **I**d **N**umber)   (for non-TAMUK employee only)

Please CIRCLE the appropriate categories:

New Operator   Full-Time Employee   De-activate (Expire) Operator
Change Access   Part-Time Employee   Student Worker

                                                            SCREEN MODEL

FAMIS System: Financial Accounting   ____   _____
                            Fixed Assets   ____   _____
                            Sponsored Research   ____   _____
                            Purchasing   ____   _____

Campus Address: _____
                                     _____

Phone: _____-_____-_____

Choose Value Based Security level that applies:	Exec.: _____
Example: Dept. <u>CHEM</u>	College: _____
	Dept.: _____

SIGNATURES

_____   _____
Person Requesting Access   Date

_____   _____   _____
Department Contact Person   Department   Date

_____   _____   _____
Department/College/Vice President   Title   Date

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FOR FINANCE & ADMINISTRATION OFFICE USE ONLY

Date Entered: _____   Ex. Date: _____

Initial Training Date: _____   Initials: _____