

Account Request Form

Applicant Information:					
Name:	Title:	Title:			
Department:	Phone:	Phone:			
Email:	New _	New Change Renewal			
Date Access Needed:					
Staff Faculty	PT Faculty	Student End Date			
Affiliate of the College	Start Date:	End Date:			
Applicant Acknowledgement: I have read and agree to abide by the Sto For those requesting access to student d I have read and agree to abide by the Fan	ata:				
Signature:	Date:	u Filvacy Act of 1974 (FERFA)			
Department Authorization:					
User needs access to perform the following job functions:					
* Application Security for systems like Banne If new employee, list former employe		orization (below)			
Department Head Signature:	e nerone replaces.	Date:			
-		Date.			
Application Authorization (see tab	•	0:			
Application	Security Class(es)	Signature and Date			
To be completed by Information T	echnology:				
Security Implemented by:	comiciosy.	Date:			
Assigned Username:					



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Information Liaisons for Banner

Systems Authorized	Department	Name	Title	Email
Advancement / Alumni	Advancement	Ana Glavin	Mgr, Advancement Information Systems	aglavin1
Student	Registrar	Irene Russo	Mgr, Student Information Systems	irusso
Finance, Payroll	Finance	Jacquie Gouveia	Finance System Manager	jgouveia
Admissions	Admissions	Jamey Reddicks	Mgr, Admissions Information Systems	Jreddicks
Financial Aid, Student A/R	Student Financial Services	Judith Kilday	Mgr, Student Financial Information Systems	jkilday