

SECURITY ACCESS REQUEST

Employees must first complete new user registration in e-campus. Enrollment Services grants security access **only** for student records, advising, student financials and financial aid functions.

Send Completed Form To:

Laurie Hebert
University of Rhode Island
Enrollment Services Green Hall
6 Rhody Ram Way
Kingston, RI 02881 USA

Employee Name: _____

Date: _____

Job Title: _____

Email: _____

Phone: (401) 874-2522

Fax: (401) 874-7587

Website: www.uri.edu/es

Email: lhebert@uri.edu

Dept Name: _____

Emplid: _____

e-campus User ID: _____

Phone Number _____

New User Access _____

Change User Access _____

Delete User Access _____

If appropriate, model this user's access after:

Model Name: _____ Model eCampus User ID: _____

Describe required access. Please provide details regarding the type of access you are requesting. For example, transcripts, permission numbers, view account summary, etc.

NEW USER DECLARATION:

I understand that information contained on the e-campus system is CONFIDENTIAL and must only be used in relation to authorized University business.

Signature: _____

Date: _____

This access request requires authorization by your Dean, Department Head, Director or Business Manager.

Authorization: I request that the above person be given the indicated level of access to Peoplesoft Student Administration.

Authorized by: _____

Name (print): _____

Position: _____

Date: _____

Fax or email completed form to: 4-7587 Attention Laurie Hebert

For Enrollment Services Use Only:

Approved by: _____

Date: _____