



WPI

IT COMPUTER ACCOUNT AND DATA ACCESS REQUEST FORM

Instructions: Hiring manager works with Data Steward and Information Analyst (IA) to fill out this form (employees do not submit for themselves).
 For New Employees: Complete and forward this form to the Human Resources department **10 days prior to start date**.
 For Existing Employees: Complete and forward this form to the Human Resources department.
 For Student Workers: Complete only "IT Access Request for Student Workers" available online at Human Resources Forms for Employees.

DEPARTMENT INFORMATION:

Date Requested: _____ Proposed Start Date: _____
 Hiring Department: _____
 Hiring Manager/Supervisor: _____

EMPLOYEE PERSONAL INFORMATION:

First: _____ Middle Initial: _____
 Last: _____
 WPI ID: _____

POSITION DETAILS:

Title: _____
 Replacement Position: ☐ No ☐ Yes
 If replacement, previously held by: _____
 Site: (off-campus/distance learning locale): _____
 Type: ☐ Permanent ☐ Temporary
 If temporary, payroll via: ☐ WPI ☐ Outside Agency
 If temporary, expected position end date*: _____
If no date is specified **account terminates in 6 months*

ADMINISTRATIVE ACCESS:

☐ **Network Shares:** List departmental file shares.

☐ **SharePoint:** List sites AND the access level - typically Read Only or Contribute (Read/Write).

☐ **Administrative permissions/reimage departmental computer** - list hostname: _____

BANNER AND ORACLE ROLES:

Check access required: ☐ PROD ☐ PPRD ☐ TRNG

Add user to Banner Class(es):

Add user to Oracle or ODS role(s):

BANNER SECURITY:

Check services required: ☐ FINANCE QUERY ☐ GRANT REPORTS ☐ EPAF ☐ WEB TIME ENTRY

List the Funds and Organization codes employee will need to access: (Use other side of sheet if additional space is needed.)

Check Employee Classes needed for EPAF and Web Time Entry: ☐ UG Student ☐ Grad Student ☐ Faculty ☐ Department Head

☐ Non Faculty Research ☐ Administration ☐ Staff ☐ Facilities ☐ Campus Police

ARGOS AND WEB TAILOR:

Argos access:

Web Tailor Role:

COMMENTS:

WHEN ACCOUNTS ARE READY NOTIFY:

Name:

Email:

Phone:

APPROVAL SIGNATURES:

Department Head: _____ Date: _____ Human Resources: _____ Date: _____

Data Steward/IA: _____ Date: _____

Use this page if you need additional space to list access.