



User Information (All fields MUST be filled out for processing) PLEASE TYPE OR PRINT LEGIBLY

Last Name: _____ First Name: _____ Middle Initial: _____
CSUB ID #: _____ Email Address: _____ Work Phone: _____
Department: _____ Faculty Staff Student Worker
 New Employee Existing Employee Contact (If other than the user): _____ Effective Date: _____

Access Roles

Requester: Please check each role you are requesting.

- AA Electronic Transcripts Load
- AA Evaluator Staff
- AA Evaluator Supervisor I
- AA UGST AVP Asst (Super User)
- AcademicPlanner: Admin Advisor

Business Justification (required for approval consideration)

Employee Signature: _____ **Employee** – I have read and agreed to the confidentiality agreement at http://www.csub.edu/bas/hr/_files/_PeopleSoft/staffconfidentialityagree.pdf
 Student Workers – Please sign and attach a **new original** confidentiality agreement at http://www.csub.edu/cms/student_conf_agreement.pdf
 Employee & Student Workers – A copy of these documents are on file with my Dept. Mgr.(MPP)

Department Manager (MPP) Signature: _____ Print Name: _____ Date: _____

Approver Signature: _____ Date: _____
Approval of Jennifer McCune, Director of Enrollment Services or Tommy Holiwell, Director of Enrollment Systems

After All Required Signatures - Return Original to: Enterprise Applications-41Lib - FOR INTERNAL USE ONLY