UNIVERSITY OF NORTH CAROLINA SCHOOL OF THE ARTS
BANNER ACCOUNT REQUEST FORM

1. __________________________________________  E – Z Arts ID: 96
   Last Name (print)  First Name  Middle
   (To Be Assigned)

2. Department: ___________________________ Building: _______________ Room:________

3. Job title ___________________________ Email ___________________________

4. My status:  (circle one)  Staff  Faculty  Administrator  Other

5. This is a request to: _____ Create a new account
   _____ Modify my account (acct name ________________)
   _____ Remove this account (acct name ________________)

6. I need Banner access in order to:
   _________________________________________________________
   _________________________________________________________
   _________________________________________________________
   _________________________________________________________

Supplemental Access Forms

   For financial records, I have attached a completed Financial Records Access form.     ____
   For personnel records, I have attached a completed Human Resources Access form.     ____
   For student records, I have attached a completed Student Information Access form.     ____
   As a member of IT staff, I have attached a completed Systems Support Access form.     ____

7. I have read the UNCSA Security and Confidentiality statement attached to this form and agree to abide by the policies outlined therein.

   ___________________________________________  ______________   ____________________
   Applicant Signature  Date  Phone

8. Authorization

   As departmental representative, I approve the access requested by the above employee and will initial attachments to this form. If the user of the above computing account leaves this department, I will notify Information Technologies so that the account may be removed.

   ___________________________________________  ______________   ____________________
   Signature of Immediate Supervisor  Date  Phone

9. Route to Banner Security Coordinator – Office of Information Technologies

   Signature of Banner Security Coordinator ___________________________  Date ______________

Form: BanSec v1.1
UNIVERSITY OF NORTH CAROLINA SCHOOL OF THE ARTS
BANNER FINANCIAL RECORDS ACCESS FORM

This form must be accompanied by a BANNER ACCOUNT REQUEST FORM

1. ____________________________ E – Z Arts ID: 96 ____________________________
   Last Name  (print)  First Name  Middle  (To Be Assigned)

2. Department: ____________________________  Job title ____________________________

<table>
<thead>
<tr>
<th>Departments: Please complete this section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Banner Financial Records Access</td>
</tr>
</tbody>
</table>

3. Functional Role: *(Pick as many as needed depending on duties performed)*
   __Maintenance (budget transfers, requisition entry, etc.)__  __Payroll Expense Detail__  __ePrint__
   __Query__  __Other__________________________

4. Supervisor Approval: For the transaction types marked above, this person is authorized to enter transactions for:
   _____ all funds and orgs for this department  OR  _____ is limited to the following:

<table>
<thead>
<tr>
<th>Index</th>
<th>Fund</th>
<th>Org</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Index</td>
<td>Fund</td>
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<td>Fund</td>
<td>Org</td>
<td></td>
</tr>
</tbody>
</table>

5. Authorizations

As departmental representative, I approve the access requested by the above employee. I understand that this person will have access to all budget information for the funds listed above, including salary information. If the user of the above computing account leaves this department, I will notify Information Technologies so that the user’s access will be revoked.

Signature of Immediate Supervisor ____________________________  Date ____________  Phone ____________

As the Banner Finance Security Coordinator, I have completed the Banner Profile Assignments Form to grant Financial Records access requested for the above employee.

Signature of Finance Security Coordinator ____________________________  Date ____________

6. Route to Banner Security Coordinator – Office of Information Technologies

Signature of Banner Security Coordinator ____________________________  Date ____________

Form: BanFin v1.1
BANNER PROFILE ASSIGNMENTS
TO BE COMPLETED BY FINANCIAL SERVICES SECURITY COORDINATOR
This form must accompany a BANNER FINANCIAL RECORDS ACCESS FORM.

<table>
<thead>
<tr>
<th>Campus ID:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Last Name (print)</th>
<th>First Name</th>
<th>Middle</th>
</tr>
</thead>
</table>

**FINANCE AND SUPPORT STAFF**
(check all that apply)

**ALL FINANCE INB USERS**
- BAN_FIN_ALL_C
- BAN_FIN_CAMPUS_RECEIVING_C
- BAN_GEN_ALL_USERS_C
- E_PRINT

**ALL FINANCIAL SERVICES USERS**
- BAN_FIN_FINANCIAL_SVC_STAFF_C
- BAN_FIN_REQUISITION_C

**GENERAL ACCOUNTING**
- BAN_FIN_ACCT_STAFF_C
- BAN_FIN_BK_RECON_C
- BAN_FIN_FUPLOAD_C
- BAN_FIN_GEN_ACCT_STDS_BRD_C
- BAN_FIN_JRNL_VCHR_C
- BAN_FIN_NCAS_C

**ACCOUNTS PAYABLE**
- BAN_FIN_AP_BASE_C
- BAN_FIN_AP_MANAGER_C
- BAN_FIN_AP_STAFF_C
- BAN_GEN_FIN_ACH_MGT_C
- BAN_GEN_FIN_ACH_QUERY_C

**BUDGET**
- BAN_FIN_BUDGET_STAFF_C
- BAN_FIN_RACF_ID_BUD_C

**SYSTEMS**
- BAN_FIN.SYSTEMS_C
- BAN_GEN_FIN.SYSTEMS_C

**PURCHASING**
- BAN_FIN_PURCH_MGR_C
- BAN_FIN_PURCH_STAFF_C
- BAN_FIN_VENDOR_MAINT_C

**REPORTING**
- BAN_FIN_EPRINT_C
- BAN_FIN_FORMFUSION_USER_C

**FIXED ASSETS**
- BAN_FIN_FIXED_ASSETS_STAFF_C

**EPRINT**
- BAN_FIN_EPRINT_FACILITIES_C

**GRANTS**
- BAN_FIN.RESEARCH_STAFF_C

**HR STAFF**
- BAN_FIN.HR_STAFF_C

**SSC PAYROLL**
- BAN_FIN.PAYROLL.SSC.C

**FINE GRAIN ACCESS GROUP**

1. ______________________  2. ______________________  3. ______________________
4. ______________________  5. ______________________  6. ______________________

**EVISIONS INTELLECHECK**

- AP SUPERVISOR RECONCILIATION  PROCESS ONLY  RE-PROCESS ONLY

**CAMPUS AT LARGE ACCESS**

**EPRINT**
- BAN_FIN.CAMPUS.RPTS.C
- BAN_FIN.EPRINT.FACILITIES.C

**FINANCE SELF SERVICE**
- CWID and PIN ACTIVATION
University of North Carolina School of the Arts
Security and Confidentiality
Statement of Responsibility

Security and confidentiality of records, reports, and files are matters of critical importance to the University of North Carolina School of the Arts (UNCSA). Access to such information is provided solely for use in the performance of assigned duties. Any other use is prohibited. The purpose of this statement is to clarify your responsibilities. Each individual who has access to information is expected to adhere to the security and confidentiality principles stated below.

As a person who has access to such information, you will not:

- Share your password with any person, or permit any other person to access information using your identity, except the University of North Carolina School of the Arts authorized technical support staff;
- Permit the unauthorized use of any information in records, reports, and files to which you have access;
- Seek personal benefit from information that you have acquired as a result of your access;
- Disclose the contents of any confidential record, report, or file to any unauthorized person, except in the conduct of professional responsibilities;
- Knowingly include a false, inaccurate, or misleading entry in any official record, report, or file;
- Knowingly destroy or alter information from any record, report, or file, except as authorized;
- Remove any record, report, or file from the office where it is maintained, except in the performance of your assigned duties;
- Cause or assist another person to violate these principles.

Violations of these principles may lead to disciplinary action consistent with applicable personnel policies. Violations can also lead to action under North Carolina Statutes pertaining to theft, alteration of public records, or other applicable sections.

By signing below, you are indicating you have read, understand and will comply with these principles. Please be advised that the conditions of this security and confidentiality statement of responsibility remain in full effect for the duration of your employment with the University of North Carolina School of the Arts. You will be required to renew this Statement of Responsibility upon rehire following any breaks in employment.

Printed Name:____________________________________  Signature:______________________________________ Date:______________________________________