# General Ledger/Fixed Asset Access Request Form

**Security Administration**

**Action requested (check only one):**
- [ ] Add Access
- [ ] Revise Access

## Supervisor

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<tbody>
<tr>
<td>1. Operator name (Print)</td>
<td>2. Operators VUnet ID:</td>
<td>3. Tech Support Person</td>
</tr>
<tr>
<td>4. Operator’s work phone:</td>
<td>5. Home dept no.</td>
<td>6. Home dept name:</td>
</tr>
<tr>
<td>7. Operator’s e-mail address:</td>
<td>8. Effective date of access change:</td>
<td></td>
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<tr>
<td>9. Supervisor’s name (Print):</td>
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### 10. Level of Access/Reason for Modification: **Centralized** / **Decentralized**

If Decentralized, define limitations (e.g., account numbers, center numbers, division, etc.):

**Reason for modification if revising current access:**

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11. *I understand that it is my responsibility to review with the operator the information to which he/she will have access, the confidential nature of that information, the Staff Handbook section on “Confidential Information”, and the consequences of violating confidentiality and/or transferring an operator ID and password to another person. I have reviewed the applicant’s current job responsibilities and access granted within Privilege Management. I certify that this request will not create a segregation of duties issue.*

**Supervisor’s Signature:** ___________________________ **Date:** __________

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### Operator’s Signature

12. *I acknowledge that the information to which I may be granted access is the property of Vanderbilt University and is to be kept confidential. I agree that I will not transfer the use of my Operator ID or password to another person and acknowledge that any violation of security or transfer of my Operator ID or password may result in disciplinary action that might include termination.*

**Operator’s signature:** ___________________________ **Date:** __________

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### Security Liaison (MC: Mary Robinson | OCGA: Michelle Vazin | All Others: Matthew McGlasson)

**13. Additional Access:**

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<tbody>
<tr>
<td>TRMS/Web Access?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Yes</td>
<td>[ ] No</td>
<td></td>
</tr>
<tr>
<td>If Yes, provide report/file name(s):</td>
<td></td>
<td></td>
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</tbody>
</table>

14. Security Liaison Signature: ___________________________ **Date:** __________

15. Date: __________

16. Passkey:
   - [ ] Existing:
   - [ ] Requires New Passkey

17. VUMC Only (Donna Kilpatrick) Signature: ___________________________ **Date:** __________

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### GL/FA Security Administrator

19. Name & Signature: ___________________________ **Date:** __________

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### GL/FA Application Steward (Dalana Robertson)

21. Approved by: ___________________________ **Date:** __________
General Ledger/Fixed Asset Access Request Form
Security Administration

Instructions

**Purpose:** This form is used to add or revise access to the General Ledger/Fixed Asset (GL/FA) application.

**Action Requested**
Indicate whether access for the individual in the Operator’s Information section should be added or revised. Select the “Add access” box if this is the initial request for access to the GL/FA application. If the operator currently has access but the access needs to be revised, select the “Revise access” box.

**Supervisor**
Steps 1-9: The supervisor of the individual requiring GL/FA access must enter the operator’s name, VUnet ID, phone number, department name and number, e-mail address, Technical Support Person’s name, and the date on which the requested changes are to take effect.

Step 10: The supervisor should note whether the operator should have access to all information in the GL/FA application (Centralized) or only limited data (Decentralized). If the operator should have decentralized access, define the nature of the limitation (for example: account number, center number, or division). If the supervisor is requesting modification to a passkey for an operator who currently has access, provide the reason for the change.

Step 11: The supervisor must sign and date the form, acknowledging the confidentiality of the data within the GL/FA application, and that potential segregation of duties issues have been considered. The form is then forwarded to the operator requiring access/modification.

**Operator’s Information**
Step 12: The operator must sign and date the form, acknowledging the confidentiality of the data within the GL/FA application. The form should be forwarded to the appropriate security liaison, as noted on the form. The security liaisons for each area are as follows: MC: Mary Robinson, OCGA: Michelle Vazin, All Others: Matthew McGlasson.

**Security Liaison**
Step 13: The security liaison must indicate whether the operator should have access to the TRMS/Web application for downloading corporate reports/files; if TRMS/Web access is needed, the report/file name(s) must be provided. The security liaison must also indicate whether the operator should have access to the production region, prior year region or both.

Steps 14-15: The security liaison must enter his/her name then sign and date the form.

Step 16: The security liaison must enter the security passkey to be assigned the operator. The form should then be forwarded to the Department of Finance’s Director of Financial Systems (Medical Center employee) or University Finance (all others).

**VUMC Only**
Steps 17-18: If the operator is a Medical Center employee, the form must be signed and dated by the Department of Finance’s Director of Financial Systems (as currently noted on the form). The form should then be forwarded to University Finance, Attn: Matthew McGlasson.

**GL/FA Security Administrator**
Steps 19-20: The GL/FA Security Administrator must enter his/her name then sign and date the form.

**GL/FA Application Steward**
Steps 21-22: A GL/FA Application Steward within the University Finance office must sign and date the form signifying approval of the request.