

# AIS User Form

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## Carbondale Campus End User Instructions FORM - AIS User Form

**Use:** This form is to revoke access to the Administrative Information System (AIS).

**Access:** Access the form via the E-Forms web site (<http://www.eforms.siu.edu>), Adobe Reader 7.0 or higher must be installed on your computer.

**Instructions:** Complete the form using the following instructions.

### Assigned by Accounting Services Section:

*AIS User ID* Leave blank. For Accounting Services use only.

*Responsibility Request Number*

Leave blank. For Accounting Services use only.

*New/Existing*

Leave blank. For Accounting Services use only.

### Employee Information Section:

*Effective Date* Enter the effective date for the revoked responsibilities. (Format DD Mon YYYY)

*Name* Enter the name of the person being revoked (Format Last, First, Middle).

*Employee ID Number* Enter the employee identification number of the person being revoked. If you do not know this number, it can be found on the Fiscal Officer Certification Report. **Do not enter the user's social security number.**

*Department* Enter the name of the department where the person is employed.

*Mail Code* Enter the mailcode of the department where the person being revoked is employed.

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*Phone Number* Enter the phone number of the person being revoked.

*E-Mail Address* Enter the e-mail address of the person being revoked.

*Form prepared by* Enter the last name, first name, phone number, and e-mail address of the person who prepared the form. This is for contact purposes.

Enter the date the responsibilities are to be revoked DD Mmm YYYY

Enter the employee's name and employee ID Number

Effective Date: \_\_\_\_\_

Enter the employee's department name, mail code, phone number, and e-mail.

<b>Employee Information Section</b>				
NAME: Last	First	Middle	Employee ID Number	
Department	Mail Code	Phone Number	E-Mail Address	
Form prepared by: _____				
Last Name	First Name	Phone Number	E-Mail Address	

**Purpose Section:**

Enter the preparer's name, phone number, and e-mail

*Revoke Access* Select if you are revoking access for an AIS user. If this option is selected indicate the reason in the "If access revoked, reason:" field.

*If access revoked, reason:*

If "Revoke Access" is selected choose one of the following reasons for the revocation.

- Separated from SIU
- Transfer to another Unit
- Change in Duties
- Other

Select if you are revoking access

Select reason for revoking access

<b>Purpose</b>		<b>If access revoked, reason:</b>	
<input type="radio"/> Request Access	<input checked="" type="radio"/> Revoke Access	<input type="radio"/> Separated from SIU	<input type="radio"/> Transfer to another Unit
		<input type="radio"/> Change in Duties	<input type="radio"/> Other _____

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## Responsibility Section:

### *Indicate if Fiscal Officer or Delegate*

Choose either Fiscal Officer or Delegate from the dropdown list and check "Revoke Access".

### *Budget Purpose*

Enter the Budget Purpose number for which the Fiscal Officer/Delegate is being revoked.

### *Unit*

Enter the Unit value of each Budget Purpose number.

### *General Ledger-Unit Inquiry Only*

Select "Revoke Access" if the user will need this responsibility revoked.

### *Fixed Assets Managerial Inquiry*

Select "Revoke Access" if the user will need this responsibility revoked.

### *Prepare Purchase Requisitions*

Select "Revoke Access" if the user will need this responsibility revoked.

### *Department Receiver*

Select "Revoke Access" if the user will need this responsibility revoked.

### *Department Buyer*

Select "Revoke Access" if the user will need this responsibility revoked.

*List Budget Purpose(s) for Department Buyer Approvals of Scheduled Releases. (Leave blank if not authorized to approve.)*

Enter the Budget Purposes for which the user is being revoked.

### *Internal Billing Technician*

Select "Revoke Access" if the user will need this responsibility revoked.

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## SIU HRMS FO Time Entry

Select "Revoke Access" if this access is to be revoked.

## SIU HRMS Other

Select "Revoke Access" and select the HRMS responsibility needing revoked.

- SIUC HRMS Academic Data Specialist
- SIUC HRMS Department View
- SIUC HRMS Graduate Data Specialist
- SIUC HRMS Internal Audit View Only
- SIUC HRMS NRA Specialist
- SIUC HRMS PSO View Only.

The form is divided into several sections with callouts:

- Responsibility Section:** A table with columns for Responsibility, Request Access, Revoke Access, Budget Purpose, and Unit. Callouts include:
  - "Select to revoke F.O. or delegate access to GL" pointing to the dropdown menu.
  - "Select to revoke GL inquiry for non-delegates or F.O.s" pointing to the Revoke Access column.
  - "List Budget Purpose and corresponding Unit value to revoke user access" pointing to the Budget Purpose and Unit columns.
  - "Select to revoke online purchase requisitions" pointing to the Request Access column for "General Ledger-Unit Inquiry Only".
  - "Select to revoke Fixed Asset inquiry" pointing to the Revoke Access column for "Fixed Assets Managerial Inquiry".
- Department Buyer Approvals Section:** A table with columns for Department Buyer Approvals, Budget Purpose, and Unit. Callouts include:
  - "Select to revoke access to enter merchandise on services delivered" pointing to the Request Access column for "Department Receiver", "Department Buyer", and "Internal Billing Technician".
  - "List Budget Purpose(s) for Department Buyer Approvals of Scheduled Releases. (Leave blank if not authorized to approve.)" pointing to the Budget Purpose column.
- SIU HRMS Other Section:** A table with columns for SIU HRMS Other, Request Access, and Revoke Access. Callouts include:
  - "Select to revoke access to enter scheduled releases against planned purchase orders" pointing to the Request Access column for "SIU HRMS FO Entry".
  - "Select to revoke access to enter/prepare internal billings for service departments" pointing to the Request Access column for "SIU HRMS Other".
  - "Select to revoke access to other HRMS responsibilities (see explanation in the 'Responsibility Section' on this form)" pointing to the Revoke Access column.
  - "Select to revoke access to bi-weekly time entry" pointing to the Revoke Access column for "SIU HRMS Other".

**Central Units Only Section:** This section is only used by the Central Units offices listed below. If you are not in one of these departments leave this area blank.

## Accounting Services

Select "Revoke Access" if the user is an Accounting Services employee revoking AIS access.

## List responsibilities

Enter responsibilities being revoked for the Accounting Services employee.

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*Accounts Payable*      Select "Revoke Access" if the user is an Accounts Payable employee revoking AIS access.

*List responsibilities*      Enter responsibilities being requested or revoked for Accounts Payable employee.

*Purchasing*      Select "Revoke Access" if the user is a Purchasing employee revoking AIS access.

*List responsibilities*      Enter responsibilities being revoked for the Purchasing employee.

*H.R./P.O./F.A.O.*      Select "Revoke Access" if the user is a Human Resources/Payroll Office/Financial Aid Office employee revoking AIS access.

*List responsibilities*      Enter responsibilities being revoked for the H.R.-P.O.-F.A.O. employee.

*Budget*      Select "Revoke Access" if the user is a Budget Office employee revoking AIS access.

*List responsibilities*      Enter responsibilities being revoked for the Budget Office employee.

Indicate user's employing department

List responsibilities to revoke

<b>Central Units Only:</b>	<b>Request Access</b>	<b>Revoke Access</b>	<b>List responsibilities:</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Select to revoke access

Employee Information Section:

*Name*      Leave blank. These fields will populate from the information entered on page one.

*Employee ID Number*      Leave blank. This field will populate from the information entered on page one.

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## Required Signatures Section:

### *User Original Signature / Date*

Obtain user's original signature (not always required under some circumstances).

### *Unit Officer Name / Phone No.*

Enter the name and phone number of the Unit Officer.

### *Unit Officer Original Signature / Date*




Obtain the Unit Officer's original signature and the date it was signed.

### *Fiscal Officer Name / Phone No.*

Enter the name and phone number of the Fiscal Officer.

### *Fiscal Officer Original Signature / Date*

Obtain the Fiscal Officer's original signature and the date it was signed.

User's signature (not always required under some circumstances)	<b>Required Signatures:</b>	
	User Original Signature: 	Date: _____
	Unit Officer Name: _____	Phone No.: _____
	Unit Officer Original Signature: 	Date: _____
Fiscal Officer's signature	Fiscal Officer Name: _____	Phone No.: _____
	Fiscal Officer Original Signature: 	Date: _____

## System Administration Use Only Section:

Leave all fields of this section blank. It will be completed by the system administrator.

## Responsibilities Approved and Assigned:

Leave all fields of this section blank. They will be completed by the back office once the form is complete.

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**Routing:**

Print form, obtain all required signatures and mail completed form to:

Sandy Partridge

Accounting Services, MC 6812.

**All forms must be submitted to Accounting Services. Accounting Services will route to appropriate areas.**