



Request for Argos User Account

Access Level: Report Viewer

INSTRUCTIONS:

SECTION 1: User requesting access completes this section.

SECTION 2: Approval by Manager/Supervisor. **Signature is required**

SECTION 3: Mark the functional area(s) in first column. Provide **specific reason for access** in second and **Signature** and **Date** in third.

SECTION 4: Requires Signature of VP for Enrollment Management. This is **mandatory**.

SECTION 5: Requires Signature of Division VP. This is **mandatory**.

SECTION 6: Requires Signature of VP for Institutional Effectiveness This is **mandatory**.

(Note: All users created, will have access to common reports.)

Section 1: User Information (Available to all Staff, Deans and Chairs)

Name:		Network ID:	Example: JDoe (John Doe)
Department:		Job Title:	
ASU Email Account:	@asurams.edu	Phone Number:	
User's Signature:		Request Type:	<input type="checkbox"/> New <input type="checkbox"/> Modify

Section 2: Approval by Manager/Supervisor

Supervisor's Name: (print)		Date:	
Supervisor's Job Title:		Supervisor's Phone:	
Supervisor's Signature:		Supervisor's Email:	@asurams.edu

** Supervisor's signature indicates that the security requested for the above listed person is appropriate for their job duties.*

Section 3: Access to Functional Area(s)

Functional Area:	Reason for needing such access:	Functional Area Supervisor's Signature & Date:
<input type="checkbox"/> Admissions		
<input type="checkbox"/> Registrar		
<input type="checkbox"/> Financial Aid		
<input type="checkbox"/> Bursar		
<input type="checkbox"/> Academic Affairs		
<input type="checkbox"/> Advising		
<input type="checkbox"/> Athletics		
<input type="checkbox"/> Auxiliary Services		
<input type="checkbox"/> Cordele Center		
<input type="checkbox"/> Distance Learning		
<input type="checkbox"/> Enrollment Management		
<input type="checkbox"/> Accounting Services		
<input type="checkbox"/> Grades (Registrar)		
<input type="checkbox"/> Graduate School		
<input type="checkbox"/> Health Services		
<input type="checkbox"/> Housing		
<input type="checkbox"/> ITS		
<input type="checkbox"/> Vet Military		

User's Signature:

Supervisor's Signature:

SECTION 4:

Requires Signature of VP for Enrollment Management

SECTION 5:

Requires Signature of Division VP

SECTION 6:

Requires Signature of VP for Institutional Effectiveness