



USER APPLICATION FORM
FINANCIAL MANAGERS WORKBENCH (FMW)
(Please complete form & return to Financial Planning)

DATE: _____ DEPARTMENT: _____

NAME: _____ TITLE: _____

ID #: _____ E-MAIL: _____ PHONE: _____

ACTION REQUESTED:

- Establish as New FMW User
- Modify User Access Modification: _____
- Revoke User Access

AUTHORIZATION REQUESTED:

DEPARTMENT USER

- Operating Plan – update access to current year to date and three year forecast.
- Reporting – summary data by account type.

FINANCIAL PLANNING USER

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Salary Plan | <input type="checkbox"/> Model Administration |
| <input type="checkbox"/> Operating | <input type="checkbox"/> System Administration |
| <input type="checkbox"/> Reporting | <input type="checkbox"/> Plan Request |
| <input type="checkbox"/> Security | <input type="checkbox"/> Other _____ |

I, the undersigned, understand that access to FMW has been granted to me on the premise that the information contained and reviewed is **strictly confidential** and will be used only for the purpose for which it was authorized. The password I have chosen will remain strictly confidential and will not be lent to others unintentionally or otherwise. I understand that the penalty for abuse of my access will be handled in accordance with the collective agreements.

Date: _____ Name: _____ Signature: _____
(print) (Signature of Applicant)

APPROVAL:

This request must be completed and sent to Financial Planning via intercampus mail or by fax to 2840.

Date: _____ Name: _____ Signature: _____
(print) (Signature of Department Head)

Note: granting approval for the above employee will provide them with access to salary and benefit information as well as the ability to make updates to the three year forecast.

FINANCIAL PLANNING USE ONLY

Date Approved: _____ Name: _____ Signature: _____
(Financial Planning)

Date Entered: _____ Name: _____ Signature: _____
(Financial Planning)

Comments: _____