

SSB ACCESS - provides view only access to budget data – (Select the appropriate checkbox below)

I need SSB Access to ALL of the same funds and orgs indicated in table above

I need access to the following funds and orgs:

FUND	ORG	FUND	ORG	FUND	ORG	FUND	ORG

EMPLOYEE Agreement (Required):

I, _____, understand that the data contained in the Banner Database is confidential. I also understand that the access I am requesting is for my use in performing my duties and responsibilities. Therefore, **I agree that my User ID and password will NOT be shared with any other persons**, and that I am responsible for any accesses logged against my User ID. I also understand that failure to keep my password private and secure may result in termination of my ability to access the Banner Database.

Requester Signature

Date

SUPERVISOR/ORG CODE OWNER Agreement (Required):

By signing below, you are aware that you are responsible for terminating access for the employee if she/he is no longer working at CCCS **or within your department**. Notify the CCCS Deputy Controller of termination no later than employee's last day in the position for which access was originally requested.

Supervisor Signature

Date

Org Code Owner Signature (if different than Supervisor)

Date

<p><i>For Fiscal Dept. Use Only</i></p> <p>Controller Approval: _____</p> <p>Entered on FOMPROF by: _____</p> <p>Date Entered: _____</p>
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