



Banner Training/Access Request Form

Instructions:

- Complete the Personal Data section. (FERPA guidelines can be reviewed at www.usu.edu/registrar/banner/ferpa.cfm).
- Have your Supervisor or HR representative complete the SSB Training and/or INB Access Request sections as applicable.
- Sign and date the form (user and supervisor).
- Links to training classes, registration, and materials can be found at <http://it.usu.edu/banner/> (Training & Registration).
- Bring your original form to the training class(es) to obtain trainers' signatures.
- Deliver signed request form to the applicable module security custodians to request security profile activation.
- Access will not be activated until approvals are obtained. You will receive email confirmations as access is granted.
- For additional help: Refer to the Banner Website (<http://it.usu.edu/banner/>) or the respective Banner Module Leads:

Banner Finance: Sharyn Bradfield Banner Student: Adam Glead Banner HR: Jodi Morgan

Personal Data:

Last Name: _____ First Name: _____ MI: _____
 Email Address: _____ Phone: _____
 Department: _____ Birth Date: _____
 Employee ID (A number): _____

By signing this form I understand the Banner system contains personal information protected by the Federal Privacy Act of 1974 (FERPA). Violation of this Act can possibly result in criminal and civil penalties.

User's Signature: _____ Date: _____

(ACCESS) SSB Training:

Your user ID will be your assigned Banner A number. Your initial password will be your birth date (MMDDYY). To find your A number, visit https://ssb.banner.usu.edu/rpzprod/z_banneridlookup.P_DispatchBannerIdLookup.

Class(es): _____ Trainer's Signature & Date Completed: _____

INB Training / Access Request:

Your user name will be FIRSTNAME_LASTNAME. Your initial password will be A followed by your SSN. Supervision has identified persons requiring this access. Please contact them to verify whether you need this clearance and what specific profile security(s) you require. See <http://it.usu.edu/banner/> (Training & Registration) for more information.

Class(es): _____ Trainer's Signature & Date Completed: _____

Additional Security Requested:

Employee's Job Title: _____

Supervisor's Approval: _____ Date: _____

Authorization Block:

Module Team Lead Approvals:	Signature Date	Activation Date
Finance: _____	Date: _____	Date: _____
<input type="checkbox"/> Finance Query <input type="checkbox"/> Requisition/Approvals <input type="checkbox"/> Sponsored Program Query <input type="checkbox"/> P-Card		
Financial Aid: _____	Date: _____	Date: _____
Human Resources: _____	Date: _____	Date: _____
Student: _____	Date: _____	Date: _____
<input type="checkbox"/> Advisor <input type="checkbox"/> Faculty		

(NCS) Account Completed: _____ Date: _____

To be completed by requesting user

To be completed by requestor's supervisor

Module Security use only