UB Infosource **FINANCIAL Data** Access Security Request

Last Name   First Name   Middle Initial

Department   Campus Telephone Number   E-mail address

UB IT Name   Person Number

Briefly describe why **direct** access to Financial data tables in Infosource is required

User Signature   Title   Date

CFO Signature   CFO Name (please print)   Date

Submit to Financial Services, 418 Crofts Hall, North Campus

Administrative Use Only

Recommendation

☐ Approve

☐ Deny

☐ Handling Financial Data Safely Training

☐ Access Granted

effective date

Comments

Administrative Approver Signature   Administrative Approver Name (Please Print)   Date