

PeopleSoft Financials Access Request Form

Instructions: Print and Complete sections 1- 4 below. Section 5 is only for Auditor's office, Treasurer's office, or OMB employees. Forward signed original to LCIS (One Government Center Suite 400 or email to lcishelpdesk@co.lucas.oh.us). Mark changes only where needed.

- NEW USER** **Model (copy) requested access of: Model Lucas County User ID/Name:** _____
 MODIFY USER RIGHTS **LOCK USER RIGHTS** **User ID to modify or lock:** _____ **Effective Date:** _____

1. Employee Information			
First Name	Middle Initial	Last Name	Title / Position
Department/Agency Name		Email Address	Work Phone Number

2. Default Chart field Information (for those who enter Requisitions only)			Enter only one fund as default
Business Unit (Required)	Fund Code (Required)	DEPT ID (Required)	LC Project ID (Optional)

3. Employee Roles (more than one may apply) <small>Note: If access is modeled after another user, the following can be left blank.</small>			
Authorization	Yes	No	
Enter Requisitions			List the full name of your requisition approver:
Work Requisitions within Department			List users that you may view/update requisitions for:
Approve others Requisitions			List users that you may approve requisitions for:
Enter/Update or Approve Purchase orders			List agency/department that you may enter, update, and approve POs for:
Enter Vouchers			

4. Employee Acknowledgment and Signature	
You acknowledge that you are an authorized user based on your job duties, responsibilities, and the need to know. You are responsible to safeguard your user ID and password. You are not permitted to share your user ID and password with anyone. Sharing this information with unauthorized users will result in revocation of access to the PeopleSoft Financial system. All public information requests must follow Lucas County's public records request policy. If you have access to available reports and information, this does not mean you are authorized to release the information. Your signature below indicates you have read and understand the information stated in section 4.	
Print Name	Title
Employee Signature	Date

5. Employee's Supervisor or Manager Signature	
As the immediate supervisor, you acknowledge and authorize this security request. The access is granted to the employee based upon their job duties, responsibilities, and the need to know.	
Print Name	Title
Supervisor or Manager Signature	Date

6. Special Employee Roles (more than one may apply) <small>*Section 6 should only be completed for Auditor's office, Treasurer's office, or OMB Employees</small>								
Auditors Office Employees ONLY			Treasurer's Office Employees ONLY			OMB Employees ONLY		
Yes	No	Authorization	Yes	No	Authorization	Yes	No	Authorization
		Disbursements User			Post Bank Data (Banking User)			Load Budgets; Open/Close Budget Pd (KK Super)
		Enter/Change Vendors (Disbursements Super)			All access to Bank Data (Banking Super)			Approves Capital Projects
		Create/Post Journals Open/Close Acct Pd (GL Super)						