

## Parnassus Online Budget Access Form

<b>Employee Information</b>	<i>(to be completed by employee. All info is required.)</i>
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1. Name: \_\_\_\_\_
2. Department: \_\_\_\_\_
3. Campus Phone: \_\_\_\_\_ 4. Email: \_\_\_\_\_

<b>Type of Change Requested</b>	<i>(to be completed by supervisor. Check one.)</i>
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- New Staff Position     Reassign Access (Previous user: \_\_\_\_\_)

Effective Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

<b>Budget Role Requested</b>	<i>(to be completed by supervisor)</i>
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- Submitter - **Training required**

**Parnassus Budget Approver:** \_\_\_\_\_

- Reviewer

- Approver

**Parnassus Budget Approver:** \_\_\_\_\_

<b>Budget Responsibility Requested</b>	<i>(to be completed by supervisor)</i>
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- IC Budget Process (For users who will submit a budget) - **Training required**

**Parnassus Budget Approver:** \_\_\_\_\_

- IC Budget Report (For those users who want view-only access to their departmental budgets)

<b>Account Access Needed</b>	<i>(to be completed by supervisor)</i>
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Please list the specific **department** or **project** numbers that you need employee to access. If you have checked "Reassign Access" above and listed previous user, disregard this section.

<b>Signature and Authorization</b>	<i>(All information is required)</i>
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I understand that by using Ithaca College computer and network resources that I am required to adhere to the policies set forth in the [Ithaca College All College Computer and Network Use Policy](#) and other additional policies, such as [Ithaca College Use and Release of Student Information](#), that govern confidentiality, access, use and release of information. I understand that failure to abide by Ithaca College policies may result in the loss of computer and/or network privileges and/or other College or legal action.

**Employee's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

As a supervisor I understand I **must** have access to these accounts myself and have authority within my area to grant access.

**Supervisor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Financial Services Use Only:**

Approved by:  
Responsibility Granted by:  
Name of Responsibility(s):

Date:  
Date: