SOUTHERN UNIVERSITY AND A& M COLLEGE

EVISIONS END USER ACCESS REQUEST FORM

REQUEST NUMBER

REQUESTOR	
Name:	Date

EMPLOYEE PROFILE	
Employee Name:	Date
Job Title:	Email:
Existing Banner User: ☐ New Banner User: ☐	User ID:
Campus:	Phone:
Location/Room:	

ACCESS REQUESTED (CHECK ALL THAT APPLY)		
INTELLECHECK: ☐	FORMFUSION: ☐	ARGOS: ☐

TYPE OF REQUEST		
Create New User:	New ID Created:	
Modify User Account	User ID:	
Delete User Account:	User ID:	

BANK ACCOUNT FOR INTELLECHECK (ONE PER FORM)						
Accounts Payable					**Payroll**	
Bank Codes						

TYPE OF FUNCTIONS REQUESTED FOR INTELLECHECK (SELECT OPTIONS)			
Process Checks		Process other (direct deposit)	
Reprocess checks		Void transactions	
Reports		Positive Pay	
Email Notifications		Reconciliation	
Print Check File Copies Locally		Print Direct Deposit File Copies Locally	
==Argos Reporting==	**X**	FormFusion	
==Argos Folder To Be Attached:==			

APPROVALS		
Employee Signature		Date:
Supervisor Signature		Date:
Security Administrator		Date:

ISD OFFICE USE ONLY		
User ID Created By:		Date:

FUNCTIONAL SECURITY ADMINISTRATOR (COMPTROLLER'S OFFICE)		
Completed By:		Date: