

**Requester, please fill out this form and email it as an attachment to your Lead Administrator (LA) for approval.**

Name: \_\_\_\_\_

NetID: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_  
*(Example: 203-123-4567)*

Home department: \_\_\_\_\_  
*(Example: FASATH, Anthropology)*

Org unit number: \_\_\_\_\_  
*(Example: 591001)*

Please explain your duties or the duties of the person you are requesting access for and why access to faculty data is needed.

Requested by name: \_\_\_\_\_  
*(This name can be the same as the name above or another)*

Date: \_\_\_\_\_  
*(Example:mm/dd/yyyy)*

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

Phone: \_\_\_\_\_

**Do you need access to the Salary/LD view?**

No \_\_\_\_\_ (Be sure top portion is filled out; email form to your LA for approval.)

Yes \_\_\_\_\_ (Be sure the top portion and the hierarchy level below is completed; email form to your LA for approval.)

**Salary and Labor Distribution (LD) Authorization Guidelines**

Access to the Faculty Information System provides a view of data related to all faculty and post docs throughout the University. Salary and labor distribution information is also available but is restricted and requires authorized access.

- Access to salaries may be provided at the following levels: division, department, or organization. Please provide the hierarchy level in the first column, and the corresponding division name, department name or organization name & code in the second column. e.g. 1: Division / School of Art; e.g. 2: Department / FASCLS Classics; e.g. 3 Organization / SOMADM Bus Office 685104.
- In addition, access to salaries and LD information is further restricted by Job Category. Based on your duties please enter "Post Doc", to view just all post doc's salary/LD information, or enter "Faculty", to include both faculty and post doc's salary/LD information, in the third column.

**Please use one line per hierarchy level request.**

HR Hierarchy Level <i>(Choose one: Division, Department or Organization)</i>	Division Name, Department Name or Organization Unit Number	Job Category <i>(Post Docs or Faculty)</i>

**Actions Requested:**

**Lead Administrator:** Please review this form and if you approve, enter your name on the approved by line below. Please forward the email and this form as an attachment to [faculty.admin@yale.edu](mailto:faculty.admin@yale.edu) and indicate your approval in the body of the email as well. If you do not approve, please forward the email and attachment to the originator and indicate the reason it was not approved in the body of the email.

**Enter Lead Administrator (LA) approval information below.**

Lead Administrator name: \_\_\_\_\_

Date: \_\_\_\_\_

Lead Administrator Title: \_\_\_\_\_

Phone: \_\_\_\_\_

*\* Clicking this button will submit form to Faculty Administrative Services.*

-----Section below to be completed by the Office of Faculty Administrative Services -----

OFAS: Please review this completed form and if approved, enter your name in the OFAS- Approved by line below and forward the email and this form as an attachment to [client.access@yale.edu](mailto:client.access@yale.edu) . Please indicate your approval in the body of the email as well. If this request is not approved, please forward the email and attachment to the originator and indicate the reason it was not approved in the body of the email.

OFAS – Approved by: \_\_\_\_\_

Date: \_\_\_\_\_