Yale Faculty Information System

3501FR.12 Access Request Form

Requester, please fill out this form a	nd email it as an attachment to your Lead Ad	ministrator (LA) for approval.
Name:	•	NetID:
		Phone: (Example: 203-123-4567)
Home department:	(Example: FASATH, Anthropology)	-
Org unit number: (Example: 591001)		_
	(Example: 591001) rson you are requesting access for and why access	to faculty data is needed
Trease explain your daties of the daties of the pe	ison you are requesting access for and wify access	to lucuity data is needed.
Requested by name:		Date:
(This na	me can be the same as the name above or another)	(Example:mm/dd/yyyy)
		Phone:
Do you need access to the Salary/LD		
No (Be sure top portion is filled or	ıt; 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.)		
first column, and the corresponding division nam School of Art; e.g. 2: Department / FASCLS Classion In addition, access to salaries and LD inform	t is restricted and requires authorized access. wing levels: division, department, or organization. e, department name or organization name & code cs; e.g. 3 Organization / SOMADM Bus Office 68510 ation is further restricted by Job Category. Based or or enter "Faculty", to include both faculty and post	in the second column. e.g. 1: Division / 04. on your duties please enter "Post Doc",
HR Hierarchy Level	Division Name, Department Name or	Job Category
(Choose one: Division, Department or Organization)	Organization Unit Number	(Post Docs or Faculty)
and this form as an attachment to faculty.admine approve, please forward the email and attachment to faculty.admine the Enter Lead Administrator (LA) approval information (La	if you approve, enter your name on the approved I	of the email as well. If you do not not approved in the body of the email. Date:
Lead Administrator Title: * Clicking this button will submit form to Faculty Administrative Services.		Phone:
Section below to be con OFAS: Please review this completed form and if approv	npleted by the Office of Faculty Administrative Served, enter your name in the OFAS- Approved by line below e your approval in the body of the email as well. If this re	w and forward the email and this form as an
OFAS – Approved by:		Date: