



DEPARTMENT OF FINANCE

Request /Validation For Access/Permissions to the Vision ERP System

New User

Existing User

NAME OF EMPLOYEE: \_\_\_\_\_ ID #: \_\_\_\_\_

EMPLOYEE'S DEPARTMENT/AGENCY: \_\_\_\_\_ Dept Loc. Code: \_\_\_\_\_

EMPLOYEE'S EMAIL ADDRESS: \_\_\_\_\_ Phone: \_\_\_\_\_

EMPLOYEE'S POSITION TITLE: \_\_\_\_\_ Position Code: \_\_\_\_\_

KEY POINT OF CONTACT IN DEPT/AGENCY: \_\_\_\_\_ Phone: \_\_\_\_\_

PERMISSIONS/ACCESS REQUESTED:

DOF/DOP/OMP/P&P (Specific Tasks)  
\_\_\_\_\_

Other (Specify)  
\_\_\_\_\_

- A Adjustment (G/L) Entry
- Budget Entry
- Cash Receipts
- Fixed Assets
- Grants Management

- G/L Inquiry
- H/R Reports\*
- Invoice Entry
- NOPA Entry\*
- Payroll Reports\*

- P.O Inquiry
- Requisitions Entry
- Time Entry\*
- Approver  
(See Form DOF-ERP-SEC-205)

\*LEVEL OF PERMISSION FOR H/R-PAYROLL MODULE:  
(Based on Table of Payroll Access and Permissions)

H/R-Payroll Loc Codes: \_\_\_\_\_

I hereby certify that this employee is required to have access to the GVI VISION ERP Systems in order to perform his/her position responsibilities, and that I am responsible for supervision the use of this permission.

I hereby certify that this employee is no longer required to have access to the GVI VISION ERP Systems

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

I hereby certify that I have reviewed the above which subscribes to the Department of Finance ERP User Access Policy

\_\_\_\_\_  
Date: \_\_\_\_\_  
KEY POINT OF CONTACT

I hereby certify that I am required to have access to the GVI VISION ERP System as indicated and that I will maintain security of my access and will not permit anyone to use my user code or my password. Further, I will not misuse this access to obtain information that I should not obtain, nor will I misuse this access in any manner.

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

Approvals:

\_\_\_\_\_  
Date: \_\_\_\_\_  
AGENCY DIRECTOR

For DOF internal use only:

I have reviewed this request and have determined that it complies \_\_\_\_\_ Date: \_\_\_\_\_  
MIS VALIDATION

\_\_\_\_\_  
Date: \_\_\_\_\_  
MIS DIRECTOR

I have entered request into the system per official policy \_\_\_\_\_ Date: \_\_\_\_\_  
MIS SECURITY ADMINISTRATOR