

CALIFORNIA INSTITUTE OF TECHNOLOGY

1099-Convey System Responsibilities Access Request

ADD <input type="checkbox"/>	CHANGE <input type="checkbox"/>	DELETE <input type="checkbox"/>
Employee <input type="checkbox"/>	Temporary <input type="checkbox"/>	Student <input type="checkbox"/>
Consultant <input type="checkbox"/>	Other _____ (company name)	
TO BE EFFECTIVE:	Beginning date: ___/___/___	Ending date: ___/___/___
	OR	check if regular staff <input type="checkbox"/>
User Information:		
Name: Last _____	First _____	Middle _____
Mail Code: _____	E-Mail: _____	CALTECH ID# _____
Phone Ext. _____	FAX _____	
Department _____		
Department Supervisor _____	Phone Ext. _____	

JPL Responsibilities YES NO

JPL FA (Full Access - Read / Write)	<input type="checkbox"/>	<input type="checkbox"/>
JPL RO (Read Only)	<input type="checkbox"/>	<input type="checkbox"/>
1099 FA (Full Access)	<input type="checkbox"/>	<input type="checkbox"/>
1099 RO (Read Only)	<input type="checkbox"/>	<input type="checkbox"/>
BASE USER	<input type="checkbox"/>	<input type="checkbox"/>
CUSTOMER SERVICE	<input type="checkbox"/>	<input type="checkbox"/>
POWER USER	<input type="checkbox"/>	<input type="checkbox"/>

CALTECH Responsibilities YES NO

SECURITY ADMIN	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM ADMIN	<input type="checkbox"/>	<input type="checkbox"/>
BASE_USER	<input type="checkbox"/>	<input type="checkbox"/>
CALTECH FA (Full Access - Read / Write)	<input type="checkbox"/>	<input type="checkbox"/>
CALTECH RO (Read Only)	<input type="checkbox"/>	<input type="checkbox"/>
CIT BASE ADV	<input type="checkbox"/>	<input type="checkbox"/>
CIT IMPORT ONLY	<input type="checkbox"/>	<input type="checkbox"/>
CIT PRINT	<input type="checkbox"/>	<input type="checkbox"/>

CALTECH & JPL Responsibilities YES NO

W2-FA (Full Access - Read / Write)	<input type="checkbox"/>	<input type="checkbox"/>
W2-RO (Read Only)	<input type="checkbox"/>	<input type="checkbox"/>

REQUESTED BY: _____ Phone ext. _____
(please print name)

APPROVED BY: Beverly Allen

signed: _____ dated: _____