

VP, Finance & Administration: Print:

SOLAR ACCESS REQUEST FORM

Student Administration Module

A&R, Campus Community, SEF/Other, Financial Aid, Student Financials, Human Resources

4						
1. USER INFORMATION	ON:					
Last Name:	First:			M.I.:	Employee ID #:	
Job Title:					Effective Date:	
mail: Extension:		Dept ID:				
Dept Name:			Fo	or Gatekeeper's use	e only: Operator ID#:	
2. EMPLOYEE STATUS	Permanent Student Worker		Temporary New Profile? Y/N:		Non-CSUN	Auxiliary
					SW Operator ID#:	
3. SELECT A MODULE	: One form per module. F	Route the com	npleted and sigr	ed form to the a	ppropriate Gatekeeper bel	ow:
Admission & Records BH-170, MD-8207	Campus Community VH-360, MD-8337	Student Ev Faculty (SE VH-270, M	••	Financial Aid BH-130, MD-8307	Student Financials VH-360, MD-8337	Human Resources VH-165, MD-8229
	CCESS REQUESTED			MOVED.		
5. SIGNATURE/APPRO Applicant's Supervisor, Divis perform their job duties. I un	OVALS: ion/College Administrate derstand that it is my obl	or: My signatu	ure certifies that sure that adequa	the named empate training is pro	ovided to the employee in o	compliance with
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5. SIGNATURE/APPRO Applicant's Supervisor, Divis perform their job duties. I un State and Federal laws and U Applicant's Supervisor: Div./College Administrator:	OVALS: ion/College Administrate derstand that it is my obl niversity policies governi Print: Extension:	or: My signatu	ure certifies that sure that adequa nformation conf Sign Ema Sign	the named emp ate training is pro ained in employe ature: il:_	ovided to the employee in one ee, applicant and student r	compliance with ecords. Date: csun.edu
5. SIGNATURE/APPRO Applicant's Supervisor, Divis perform their job duties. I un State and Federal laws and U Applicant's Supervisor:	OVALS: ion/College Administrate derstand that it is my obl niversity policies governin Print: Extension: Print:	or: My signatu	ure certifies that sure that adequa nformation conf Sign Ema Sign	the named emp ate training is pro ained in employe ature: il:_ ature: ature:	ovided to the employee in one ee, applicant and student r	compliance with ecords. Date: csun.edu Date:

Signature:

Date:

SOLAR ACCESS REQUEST FORM - STUDENT ADMINISTRATION MODULE INSTRUCTIONS

Use this form to request access for SOLAR Student Administration modules. Complete ONE form for each employee/module. If an employee is leaving and a new employee is hired, two forms must be completed. One form to remove all access for the employee leaving and another form for the new employee requesting new access to the specified module.

1. USER INFORMATION:

All fields are mandatory in this section. The Operator ID will be filled out by the Security Gatekeeper.

2. EMPLOYEE STATUS:

Select the employee status. If the employee is a student worker, the Security Gatekeeper will complete the SW Operator ID# field.

3. MODULES:

Select **ONE** of the following SOLAR SA modules for each employee: 1. **Admissions & Records (A&R)**; 2. **Campus Community**; 3. **Student Evaluation of Faculty (SEF) / Other**; 4. **Financial Aid**; 5. **Student Financials**; 6. **Human Resources**

4. DESCRIPTION OF ACCESS REQUESTED TO BE ADDED OR REMOVED:

Specify *ADD* or *REMOVE*, along with a brief description of the requested access within the selected module. If applicable, provide the full name and ID number of another employee in the department that has the same access.

5. SIGNATURE/APPROVALS:

This form must be signed by the *Applicant's Supervisor* and *College or Division Administrator* after completion. Send the form to the appropriate Gatekeeper/Module listed in Section 3 on the form.

6. APPROVAL OF ROLES ACCESSING CONFIDENTIAL INFORMATION:

Due to the confidential nature of data, all roles in the *Financial Aid, Student Financials* and *Campus Community* modules require approval by the *Vice President for Administration and Finance. A <u>Confidentiality Statement</u> must be on file. The Security Gatekeeper will obtain the Vice President's signature when required.*

7. TRAINING

The Applicant's Supervisor and College or Division Administrator is responsible for ensuring the completion of appropriate training for the requested roles.

8. QUESTIONS

If you have questions about the form or need clarification on the roles, please contact the appropriate gatekeeper for the requested module located on the *SOLAR Gatekeepers list*.