



CALIFORNIA INSTITUTE OF TECHNOLOGY

Access Request for Financial Department Systems Responsibilities
Research Administration, Cash Management, Fixed Assets and General Ledger

<input type="checkbox"/> 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 _____ 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. _____ (Print Name)		

Accounts Receivable

- ☐ CIT – AR Accountant
- ☐ CIT – AR Accountant SR
- ☐ CIT – AR Administrator
- ☐ CIT – AR View

Fixed Assets

- ☐ CIT – FA Accountant
- ☐ CIT – FA Administrator
- ☐ CIT – FA View

General Ledger

- ☐ CIT – GL Accountant
- ☐ CIT – GL Accountant SR
- ☐ CIT – GL Administrator
- ☐ CIT – GL View

Cash Management

- ☐ CIT – CM Accountant
- ☐ CIT – CM Setup
- ☐ CIT – CM View

Grants Accounting

- ☐ CIT – PTA Management
- ☐ CIT – OGM Administrator
- ☐ CIT – OGM View

Miscellaneous

- ☐ CIT – Month End Close
- ☐ CIT – Budgeting and HR Reporting
- ☐ CIT – PTA Setup

ORG Name: _____

Role: ☐ Preparer
 ☐ Approver
 ☐ Email

Processing Area: ☐ Auxiliaries
 ☐ General Budget
 ☐ Plant Fund
 ☐ Endowment
 ☐ Gift Fund
 ☐ Sponsored

Departmental Approval: _____
(Supervisor's Signature)

Finance Approval: _____ Date: ____/____/____
Theresa Slowskei or Ana Ulloa