THE
UNIVERSITY
OF RHODE ISLAND

THINK BIG ● WE DO℠

OFFICE OF FINANCIAL STRATEGY AND PLANNING
Adams House, 85 Upper College Road, Kingston, RI 02881 USA   p: 401.874.2509   f: 401.874.5824   uri.edu/fsp

University of Rhode Island
PBCS, University Budgeting Application
Security Access User Request Form

Instructions: Prior to access being granted, you must have access to the URI PeopleSoft Financial System and review and sign the University Budgeting Application Confidentiality Agreement.

Please visit https://web.uri.edu/fsp/pbcs/ to access the Confidentiality Agreement.

Please complete Sections 1, 2, 3 and 4 of this form. Please email the completed and signed form to: pbcs@etal.uri.edu

Please call the Financial Strategy & Planning office with any question (874-2509).

Section 1: Application Information *(please print)*

Name: _____

Title: _____

Employee ID: _____

Immediate Supervisor Name: _____

College & Dept. Name: _____

Phone: _____

Email: _____
Note: Email address will double as PBCS username

Section 2: Type of Request *(please check one box below)*

New User Access ☐

Update/Change Access ☐

Delete All Access ☐

Termination ☐

Temporary Access ☐

Temporary Access Start Date _____ (mm/dd/yy)

Temporary Access End Date _____ (mm/dd/yy)

Section 3: Department Number(s) Access

Please list Department Number(s) for Access

_____   _____

_____   _____

_____   _____

Section 4: Required Signatures

Accessor – I acknowledge I am authorized by this college/department to make this request. I certify that a user account in the system is required to fulfill my job duties. I thereby request access to the PBCS, University Budget Application.

Signature _____   Date: _____

Supervisor – I acknowledge that I am an authorized representative of the requesting department. I certify that the applicant and user account requested on this form is required to fulfill their job/duties on behalf of this department. I hereby approve this application for access to the PBCS, University Budget Application.

Signature _____   Date: _____

==Upon completion of Sections 1, 2, 3 & 4, please email this document to: PBCS@etal.uri.edu==

Section 5: Business Process Owner Approval & Implementer Record   FSP USE ONLY

Prior to approval, FSP verified employee has access to URI PeopleSoft Financial System

Planning User   [   ]
Planning Power User   [   ]
Administrator   [   ]

Ownership Group Assignments

Name (please print)_____
Signature _____   Date: _____

Implemented By:

Name (please print) _____
Signature _____   Date: _____