SAP Authorization Request

SAP @ *Ole Miss*

Instructions:
1. Complete form; *signature of department head is required.*
2. Fax completed form to x7180.

Request New License ❑ *Yes* **Replacing** _____

Request Change to Active License ❑ *Yes*

Delete License ❑ *Yes*

Employee Name: _____

Phone Number: _____

E-mail Address: _____

Department: _____

Building and Room # _____

Supervisor/Manager: _____

Do you have the SAP GUI installed on your computer? ❑ Yes ❑ No

Computer Platform: ❑ Macintosh ❑ PC

Department Head Signature _____ Date _____

Training and Access

	Request		For Official Use Only		
	Training	Access	Trained	Access	Processed
Beginners*					
Notifications *(Maintenance/Work Order Request to PPD or Telecomm)*					
Notifications Web					
HR *(Hiring and Recruitment)*					
Time Management *(Payroll & Leave)*					
Material Management *(Purchasing)*					
Asset Management *(Property)*					
Procurement Card *(Departmental Credit Card)*					
Reporting I *(Accounting Data)*					
Reporting II *(Accounting Data)*					
Payroll Reports *(Accounting Data)*					
Special Authorization *(Describe below;use back if necessary)*					

[Ex: Please add user Jane Doe with the same authorizations as John Smith.]

_____

_____

_____

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*** The *Beginners* Class is a *mandatory* pre-requisite *for all other* SAP training classes.**

User ID

(For Official IT Use Only)

ITManagement _____ Date _____

Date Request Processed _____

Available SAP license:? ❑ *Yes* ❑ *No*