

Banner Advancement Account Request Form

ETSU Office of Information Technology
 401 Roy Nicks Hall, Box 70728
 Johnson City, Tennessee 37614
 (423) 439-4648 • oithelp@etsu.edu

This section for use by the Office of Information Technology

Application Number	_____
Applicant Name	_____
Date Received	_____

Section 1. Personal Information. To process your request, all information in this section must be completed. Please print or type.

Name	_____	[last]	[first]	[middle]
ETSU Domain Name	_____	@etsu.edu		
Banner ID Number	_____	School / College	_____	
Date of Birth	_____	Department / Office	_____	
ETSU Phone Number	_____	Campus Box Number	_____	
Supervisor	_____	Budget Number	_____	

Faculty Staff Adjunct Faculty
 I am not paid through ETSU Payroll. ETSU Physicians (MEAC) other: _____
 New Employee: start date - ____ / ____ / ____ Temporary Employee: end of contract - ____ / ____ / ____

Section 2. ePrint Advancement report access. NOTE: Departmental accounts can only be requested by regular, full-time employees. Temporary employees must use a departmental account, requested by a regular employee, to access these applications.

I am requesting access to ePrint for Gift Payment Report for the following indexes (all indexes begin with an "F"): _____

Request has been reviewed and approved by the Banner Finance Data Custodian.

 Signature of Finance Data Custodian Date

Section 3. Banner Advancement Applications. Check all that apply. Temporary employees must use a departmental account, requested by a regular employee, to access these applications.

<input type="checkbox"/> Advancement Level 1 (AD_AD1)	<input type="checkbox"/> Advancement Level 2 (AD_AD2)
<input type="checkbox"/> Advancement Level 3 (AD_AD3)	<input type="checkbox"/> Advancement Level 4 (AD_AD4)
<input type="checkbox"/> Athletics (AD_ATH)	<input type="checkbox"/> WETS (AD_WETS)
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Section 4. Responsibilities and Approvals. Form must go to Advancement Services Box 70709 before sending to OIT. Form will not be processed without ALL signatures.

Request has been reviewed and approved by the Banner Advancement Data Custodian.

 Signature of Advancement Data Custodian Date

I understand that data integrity is my responsibility and have read and agree to abide by the Data Standards Data Entry Guidelines, found at http://www.etsu.edu/banner/documents/ETSU_Data_Standards_Doc_V3-3_for_Web-Revised.doc. I agree to abide by the ETSU Computer Resource Code of Ethics, found at <http://www.etsu.edu/oit/ppp/policies/ethics.asp> and further agree that accessing ETSU computing resources and using my assigned user identification and/or password gives ETSU permission to review, by any method it deems appropriate, any and all material I store on any system owned, operated and/or maintained by ETSU in order to protect the integrity and security of the system.

signature of applicant	date	signature of department head, budget supervisor or faculty advisor	date	printed name of department head, budget supervisor or faculty advisor
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