

## Account or G/L System Access Form

All information is required unless noted otherwise

### Submitter Section

Employee Name \_\_\_\_\_  
Employee Number or Student ID \_\_\_\_\_  
Lakehead Login ID \_\_\_\_\_  
Job Title \_\_\_\_\_  
Department \_\_\_\_\_  
Campus \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Email Address \_\_\_\_\_  
  
Account Number/GL Code(s) \_\_\_\_\_  
  
Effective Date \_\_\_\_\_  
End Date \_\_\_\_\_

Requisition Access

myBudget Viewing Access

Approver Access

### Supervisor Section

New Access

Change Access from (Employee Name) \_\_\_\_\_

Supervisor Name \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Signature \_\_\_\_\_

#### FINANCIAL SERVICES USE ONLY

\_\_\_\_\_  
Finance Signature

\_\_\_\_\_  
Finance Name

\_\_\_\_\_  
Date