



**OFFICE OF THE UNIVERSITY CONTROLLER**

**User – ID and Password  
Create/Modify/Delete Form**

Return to: Ray Tam  
 230 West 41<sup>st</sup> Street  
 9<sup>th</sup> Floor, Room 910  
 New York, NY 10036  
 Tel #: (212) 397-5657 Fax #: (212) 397-5680 Email: Ray.Tam@mail.cuny.edu

*Note: College must make a photocopy for own records.*

System(s):	FAS _____	FIS _____	SFA _____
Action:	Create _____	Modify _____	Delete _____
User Name:	_____		Phone Number: _____
User-ID (5 Letters, Last 2 = Alpha College Code):	_____		
	(E.g., George W. Bush – Washington College = GWBWC)		
Password: (5-8Alphanumeric)	_____		
Mainframe Reports Printer Destination:	_____		
	(See your systems specialist for print location; will default to XX001 if not specified. Note: XX = Alpha College Code)		
College Name:	_____		
College Address:	_____		
<u>FAS</u> (may check more than one) <input type="checkbox"/> Access All Screens – Except: GAAP and Trust & Gifts Screens <input type="checkbox"/> All Retrieval Screens Only <input type="checkbox"/> GAAP <input type="checkbox"/> OTPS Input and Retrieval <input type="checkbox"/> OTPS Retrieval Only <input type="checkbox"/> Trust and Gifts <input type="checkbox"/> Tuition and Fees and OTPS Retrieval <input type="checkbox"/> Tuition and Fees Input and Retrieval		<u>FIS</u> (may check more than one) <input type="checkbox"/> Central Budget <input type="checkbox"/> Central Data Retrieval <input type="checkbox"/> Central OTPS <input type="checkbox"/> Central P/S <input type="checkbox"/> College Accounts Payable <input type="checkbox"/> College Budget <input type="checkbox"/> College Data Retrieval <input type="checkbox"/> College Payroll <input type="checkbox"/> College Payroll and Budget Combined <input type="checkbox"/> College Purchasing	
<u>SFA</u> (check only one) <input type="checkbox"/> Access All Screens <input type="checkbox"/> Display Screen Only <input type="checkbox"/> Bursar Functions <input type="checkbox"/> Prior Year Access <input type="checkbox"/> Voids/Splits and Bursar <input type="checkbox"/> Voids/Splits and Display <input type="checkbox"/> All Screens Except Voids/Splits		<u>SFA - Additional Options</u> <input type="checkbox"/> Direct Deposit Acct. Data — S49 <input type="checkbox"/> FWS/IWS Replace Check — S88 <input type="checkbox"/> SFA Reports — S70 <input type="checkbox"/> R2T4	
		<u>SFA - Deduction Source</u> (check one) <input type="checkbox"/> Financial Aid Office <input type="checkbox"/> Bursar's/Business Office	
Authorized Signature:	_____		Date: _____
	(ID Security Coordinator/Supervisor)		Tel #: _____
Print Name:	_____		Email Address: _____
	(ID Security Coordinator/Supervisor)		(ID Security Coordinator/Supervisor)

**FOR OUC USE ONLY**

	FAS	FIS	SFA
Input By:	_____	_____	_____
Date:	_____	_____	_____
Security Level:	_____	_____	_____