

BEN FINANCIALS
ID / NAME CHANGE REQUEST FORM

Part 1. Identification Information (please print)

(To be completed by Requestor)

This is a request for: Change Logon ID

New Full Name (include middle initial): _____

Old Full Name (include middle initial): _____

Current User ID _____

Employee **Consultant** (indicate expiration date __/__/____)

University extension: _____ **Department:** _____

E-mail address: _____ @ _____

Intramural address: _____

Penn ID #: _____ **PennKey:** _____

I understand that this LOGON ID gives me access to administrative computing resources for my exclusive use and support of my work as an employee of or contractor to the University of Pennsylvania. I understand that this access is controlled by my password. I take responsibility for changing my password on a regular basis and for maintaining the secrecy of my password. I understand that I am responsible for anything done on administrative computing resources with my LOGON ID. I take responsibility for maintaining the confidentiality of University information.

Required Signatures:

Requestor: _____ **Date:** ____/____/____

Requestor's Supervisor: _____ **Date:** ____/____/____

School/Center Access Administrator: _____ **Date:** ____/____/____

Part 2. System Access

(To be completed by Security and System Administrators)

Authorizations in order. Received ____/____/____

Authorizations incomplete. Returned to sender.

New Application/Markview **Date completed:** _____

ID Assigned _____ **Initial password:** _____

New AIX (To access extract reports) **Date completed:** _____

ID Assigned _____ **Initial password:** _____

Remarks:

Send completed forms to:

Financial Systems
319 Franklin Building
3451 Walnut Street/6284

To obtain forms:

See the following website:
<http://www.finance.upenn.edu/comptroller/forms/#BEN>