

**Hampton University Computer Center
Request to REVOKE Employee Banner FORMS Access**

An online form

Name (First, Middle, Last)	Employee HUID#	Dept#	Phone
Title	Employee Function/Job Duties		
Reason for Revocation	Effective Date For REVOCATION of ACCESS		

	Finance Security Budget /Account Numbers			
Banner Modules	Banner Other Modules	Index	Fund	Organization
<input type="checkbox"/> Student				
<input type="checkbox"/> Financials				
<input type="checkbox"/> Alumni				
<input type="checkbox"/> Human Resources				
<input type="checkbox"/> Financial Aid				
<input type="checkbox"/> Check if additional listing is attached to this form.				

System accounts will not be generated for persons not employed by Hampton University. Only staff persons who can be successfully verified as Hampton University employees through the Human Resources System, or through documentation such as contracts will receive access to M.I.S resources. User IDs generated for temporary employees or staffing persons will be at the risk of the department's supervisors and the agency at which the person is employed. Therefore the agency is liable for damages to information and or resources.

Supervisor's Printed Name , HU Phone Number, and Signature (Required)	Date

Department Level Supervisor Printed Name , HU Phone Number, and Signature (Required)	Date

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Computer Center Department Use Only

Signature for Revocation of Modules	Date Access Revoked

NAME: _____

HUID # _____

PRE ACCESS

Listing Enrolled in GSASECR

User/Class Privileges Maintenance

POST ACCESS

Listing Enrolled in GSASECR

User/Class Privileges Maintenance

****** Capture screen shots in Word Document and attach to form**