



## Banner Human Resources Authorization

For access to Banner and to Web processes, complete and fax at **398-8287** (Shared Services).

Form may be filled in by printing clearly in ink, or by keying information in using a browser. **NOTE:** Banner and Web appointment training is mandatory in order to receive authorization and customer support.

### Section 1 – Applicant

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Phone: \_\_\_\_\_ McGill ID: \_\_\_\_\_ Banner UserID: \_\_\_\_\_

Department: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*I understand that I may not use such personal and/or confidential information and/or documents in an unauthorized manner, and I may not misuse, divulge or subvert such information.*

**A) Banner client access.** Briefly indicate what you need Banner HRIS access for. If you need an access identical to a co-worker, please indicate that co-worker's Banner UserID and name.

#### B) Web Appointment access on Minerva.

i) Choose your level at the University (check only one)

Dept-level  Faculty-level  VP Academic approver  HR Admin approver  Accounting FOAPAL Verification

ii) Check desired type of access

Type of access	Academic	Admin. Support	Trades & Services	Acad. Students	Course Lecturer	Salaried Casual
Full appointment process (includes <u>all</u> processes)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited access: Hires only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited access: FOAPAL maintenance only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited access: Appointment Status Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**C) Organizations.** Indicate the org units to which you require access:

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### Section 2 – Approval from Department head or Faculty-level head (all fields are required)

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Phone: \_\_\_\_\_ McGill ID: \_\_\_\_\_ Email: \_\_\_\_\_

Department: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### Section 3 – Human Resources Approval (for HR use only – DO NOT WRITE IN THIS SPACE)

Course(s) attended:  Registered to listserv :

Granted HRIS Classes:

BSX (Imaging) Groups:

Employee Confidential Views:

Approver's stamp or signature, with date: