

## **TAMUS SO Laserfiche Access Request**

		1
USER INFORMATION NEW CHANGE REMOVE		
Employee Name:	Employee Phone:	
Employee E-Mail:	Employee UIN:	
TAMU NetID:		
TAMU NetID is required for Laserfiche access; if this is blank the form will i	be returned.	
ACCESS SAME AS ANOTHER USER?		
Other User Name:	Other User UIN:	
Note: Listing another user's name or UIN will decide all further access. Skip to signatures below.		
COMMENTS Please add any comments about your requested access		
I understand that I will be in violation of System regulations, State and Federal law if I gain or help others gain unauthorized access to the systems above. I acknowledge that neither I nor anyone else possess the authority to allow anyone to use my ID or password. I understand that if I violate System regulations and State and Federal laws by gaining or helping others gain unauthorized access, I will be subject to disciplinary action and criminal prosecution to the full extent of the law. (Chapter 33, Title 7 of the Texas Penal Code). I accept the responsibility of keeping the reports and information confidential. I understand, accept and will complete training related to the software provided to me by Texas A&M System Members. Misuse or abuse of this responsibility as User/Supervisor may be just cause for revocation of software access and disciplinary action. I agree further not to attempt to circumvent the computer security system by using or attempting to use any transactions, software, files, or resources I am not authorized to use.		
User Printed Name	Signature	Date
User Printed Name	Signature	Date
	Signature	Date
APPROVAL REQUIRED		
APPROVAL REQUIRED  Approved: Please select a suitable approver (by your signed form to them for approve)	based on the access requested) fro	m the list below and email
APPROVAL REQUIRED  Approved: Please select a suitable approver (b)	based on the access requested) fro	m the list below and email
APPROVAL REQUIRED  Approved: Please select a suitable approver (by your signed form to them for approvent)	based on the access requested) fro	m the list below and email



## **TAMUS SO Laserfiche Access Request**

Name: UIN:

## **NOTE TO APPROVER**

Please scan and email approved form to: <u>FAMIS-Security@tamus.edu</u>

Please include 'Laserfiche Access' in the subject line of the email.

If there are any questions, please call the FAMIS Help Line, (979) 458-6464.

k:\fa\doc\sec\forms\tamussolaserfichesecurityaccessformcurrent.docx Rev. 2/27/2024