

EPAF Security Application

This application is for security access to HR EPAF. Please complete and return it to Human Resources by fax to (209) 946-2835 or scan and email to epafstk@pacific.edu.

Completion of this application is required for HR EPAF access for new users.

Application Date: _____

Name _____ **Employee ID#** _____

E-mail _____@pacific.edu **Ext.** _____ **Dept.** _____

Part I – ORIGINATOR ACCESS

Are you an ORIGINATOR or someone who starts the EPAF? (circle) Yes No (if no, go to Part II)

List of categories of employees for which you originate EPAFs: (Students, T/C, Staff, etc.)

Faculty Assignments Staff Assignments Temporary/Seasonal Assignments

Graduate Assistants Student Assignments

List all of the budget organization numbers for which you originate EPAFs:

(Example: 70001) If you originate EPAFs for an entire department or division, indicate it Here. Or, list additional budget organizations if necessary.

1) _____ 3) _____

2) _____ 4) _____

Indicate the individual who approves your EPAFs:

Name _____

Approval Level (Hiring, Dept. Head, Budget Manager, etc.) _____

Part II – APPROVER ACCESS

Are you an APPROVER? (circle) Yes No

If yes, indicate the level(s) on which you approve EPAFs:

Dept. Head, Budget Manager, Hiring Manager, VP/Dean, etc. (list departments)

Section III: Certification & Confidentiality Notice

I certify that all of the above-listed information is accurate. I understand that I am being provided access to financial & personnel information necessary to perform my job at Pacific. I will not use this information for personal use or share with anyone whose official UOP job duties do not require use of that data.

Signature of Employee: _____ **Date:** _____

Signature of Your Supervisor: _____ **Date:** _____