

**ESSEX COUNTY COLLEGE
INFORMATION TECHNOLOGY**

USER PROFILE MAINTENANCE BANNER FORM

Date: _____

User Information

New account Additional Banner Access Banner current username: _____

Affiliation: Administrator Faculty Staff Other _____

Name: _____ ECCID: _____

Department: _____

Location: _____ Extension: _____

Justification: _____

If you know a current staff member in your department who has the same access you are requesting, please provide his/her full name: _____

FORM/PROCESS	*F	Area head Initials Required	FORM/PROCESS	*F	Area head Initials Required	FORM/PROCESS	*F	Area head Initials Required

Department's Director/Chairperson Approval _____

Area Head Approval Required _____

For Finance Profile Comptroller's Signature Required _____

DO NOT WRITE BELOW THIS LINE INFORMATION TECHNOLOGY PERSONNEL ONLY

Salah Dami's Approval: _____

Process Date _____ / _____ / _____

Expiration Date: _____ / _____ / _____

Processed by: _____

Banner Login Name: _____

NOTES: _____

***F=Function [M=Maintenance Q=Query]**