



SYSTEM AUTHORIZATION ACCESS REQUEST (SAAR)

TYPE OF REQUEST | INITIAL MODIFICATION DELETION | DATE

PART I (To be completed by user)

1. NAME (Last, First, MI)		2. DATE ASSIGNED	
3. ORGANIZATION		4. OFFICE SYMBOL/DEPARTMENT	
5. JOB TITLE/FUNCTION		6. GRADE/RANK	7. PHONE

STATEMENT OF ACCOUNTABILITY

I understand my obligation to protect my password. I assume the responsibility for data and the system I am granted access to. I will not exceed my authorized access.

USER SIGNATURE	DATE:
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PART II (To be completed by User's Supervisor)

8. ACCESS REQUIRED	<input type="checkbox"/> UNCLASSIFIED	<input type="checkbox"/> CLASSIFIED
9. TYPE OF USER	<input type="checkbox"/> FUNCTIONAL	<input type="checkbox"/> SYSTEM ADMINISTRATOR <input type="checkbox"/> APPLICATION DEVELOPER

10. JUSTIFICATION FOR ACCESS

Indicate what groups and systems the individual will be given permission to read/write to and any other special instructions.

VERIFICATION OF NEED TO KNOW [I certify that this user requires access as requested in the performance of his/her job function.]

11. SECURITY CLEARANCE				
12. FUNCTIONAL DATA OWNER		13. ORG/DEPT	14. PHONE NUMBER	15. DATE
16. SIGNATURE OF SUPERVISOR		17. ORG/DEPT	18. PHONE NUMBER	19. DATE

PART III (To be completed by AIS Security Staff adding user)

20. USERID (Mainframe)		21. USERID (Mid-Tier)		22. USERID (Network)	
23. SIGNATURE		24. PHONE NUMBER		25. DATE	