

OPB Application Request Form

The Agency Head or the Agency Fiscal Officer must approve a request form for each person within the agency requesting access to an application below. The Agency is responsible for informing OPB of any subsequent changes in the status of employees assigned IDs and passwords. Agencies may only request IDs and passwords for those employees who will directly use the system.

Users may request access to their attached agencies if necessary. Please list the attached agencies for which access is needed on the form.

Please enter one user per form.

For each application the following information is **required**:

Full Name of User: (ex: William D. Smith)	Title:
Agency Name:	Telephone:
Division:	E-mail Address:

Additional attached agencies for which you require access:

*Note: Users requesting access to both a parent and attached agencies will have the same level of access for all entities requested. Users who require a separate level of access (e.g. data entry vs submit) for attached agencies must request a separate login id.

PBCS	<p>Please check the tasks required:</p> <p>AOB _____ Amendments _____ Allotments _____</p> <p style="padding-left: 100px;">Budget Development _____ Capital Budgeting _____</p> <p>Please check the level of access required (select one):</p> <p>Read Only _____ Data Entry _____ Submit _____</p>
User Fee Tracking System	<p>Please check the type of access required:</p> <p>Agency Administrator (___) User Fee Editor (___) View Only Access (___)</p>

Signature of user:

X _____ Date: _____

Signature of Agency Head or Agency Fiscal Officer:

X _____ Date: _____

Please fax completed forms to OPB at 404-656-7916