

Security Audit Access Form

Security Action Requested					
New User Setup (Complete all applicable fields and roles)			Lock Out Existing Us (Complete User Informati		
User Information					
Name - Last, First, Middle Initial	Name Change	Email Address(must be o	different from Employee Self-S	Service email)	
Business Unit:		Department ID:			
User's Job Title:		Cardinal User ID:			
Supervisor Name:		Supervisor Employee ID:			
FIN SECTION					
FINANCE PRIMARY PERMISSION LISTS					
Business Units: (10000 to 59999)		Business Units: (60000 to 99999)			
FIN Audit Roles:					
AUDIT Inquiry	APA all pages - read only FIN (APA Only) APA Spec		APA Special FIN (APA (A Special FIN (APA Only)	
HCM SECTION					
HCM PRIMARY PERSMISSION LISTS					
Business Units: (09000 to 59999)		Business Units: (60000 to 99999)			
HCM Audit Roles:					
AUDIT Inquiry HR Sensitive	Benefits Read Only		HR Read Only		
Payroll Read Only	TA Read Only		APA all pages - read only HCM (APA Only)		
APA Special HCM (APA Only)					
Approvals					
User Printed Name Use		Signature (sign above)		Date	
Supervisor Printed Name	Superv	isor Signature (sign above)		Date	
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Cardinal Security Officer Printed Name		Cardinal Security Officer Signature (sign above)		Date	
Department of Accounts Approval (Only Required for Statewide Primary Permission Lists)					
DOA Approver Printed Name	DOA A	DOA Approver Signature (sign above)		Date	

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