BUSINESS AND FINANCIAL SERVICES
TEM Arranger Application

Colorado State University

TEM APPLICATION FOR:	NEW ACCESS ○	ADDITIONAL ACCESS ○	DELETE ACCESS ○

USER NAME (Last, First, Middle)	CSU ID #:	EID	TODAY'S DATE
DEPT. NO.	DEPT. NAME	E-MAIL ADDRESS	
CAMPUS MAIL ADDRESS		PHONE NUMBER	

TEM Arranger Access Requested for:

Examples: Dept Nbr/Unit: 18xx Dept Nbr/Unit 1802

Dept Nbr/Unit: _____	Dept Nbr/Unit: _____	Dept Nbr/Unit: _____
Dept Nbr/Unit: _____	Dept Nbr/Unit: _____	Dept Nbr/Unit: _____
Dept Nbr/Unit: _____	Dept Nbr/Unit: _____	Dept Nbr/Unit: _____
Dept Nbr/Unit: _____	Dept Nbr/Unit: _____	Dept Nbr/Unit: _____
Dept Nbr/Unit: _____	Dept Nbr/Unit: _____	Dept Nbr/Unit: _____
Dept Nbr/Unit: _____	Dept Nbr/Unit: _____	Dept Nbr/Unit: _____

I understand that the data contained in KFS is confidential. The access I am requesting is for my use in performing my job duties & responsibilities. I agree that my username & password will not be shared and I am responsible for any accesses logged against my username. In using my username & password, I will follow the policies & procedures of the University.
I will not use another person's username and password. If I terminate employment with the University or my department, I will notify Business and Financial Services.

Upon completion of the form, email to bfs_kfs_applications@colostate.edu

Applicant's Signature **Date**

Print or Type Name of Director or Dept. Head **Director or Dept. Head** **Date**

Print or Type Name of Dean or VP Authority **Dean or VP Authority Signature** **Date**

FOR BFS USE ONLY

Business & Financial Services **Date**