

Financial Systems Authorization Form

County of Santa Barbara

Office of the Auditor-Controller

Only authorized departmental/agency designees are allowed on-line access to Financial Systems. Immediately notify the Financial Accounting and Customer Support Division in the Auditor-Controller's Office of changes in authorization or termination of an employee by faxing this form to the Auditor-Controller Help Desk at 568-2016. The Auditor-Controller's Office reserves the right to inactivate accounts at any time if the account is misused or if there is an extended period of inactivity.

By completing this form, you agree to maintain the confidentiality of all financial information accessed.

1	Access - Choose one <input type="checkbox"/> ADD ACCESS <input type="checkbox"/> DELETE ACCESS
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2	Systems and system options <div style="background-color: #e0e0e0; padding: 2px; margin-bottom: 5px;">County Employees:</div> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> SALARY MODEL</td> <td style="width: 50%;"><input type="checkbox"/> GRANT MANAGEMENT SYSTEM (GMS)</td> </tr> <tr> <td><input type="checkbox"/> BUDGET DEVELOPMENT (FOR COUNTY BUDGET PREPARATION)</td> <td><input type="checkbox"/> PROPERTY TAX REVENUES REPORTING SYSTEM</td> </tr> <tr> <td><input type="checkbox"/> CAPITAL IMPROVEMENT PLAN SYSTEM (CIP)</td> <td></td> </tr> </table> <div style="background-color: #e0e0e0; padding: 2px; margin-bottom: 5px;">Schools and Special Districts:</div> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> FIN 2 / 5 - Reports</td> <td style="width: 50%;"><input type="checkbox"/> PROPERTY TAX REVENUES REPORTING SYSTEM</td> </tr> <tr> <td><input type="checkbox"/> FIN 2 / 5 - Posting Rights <small>(For County Education Office Only)</small></td> <td></td> </tr> </table>	<input type="checkbox"/> SALARY MODEL	<input type="checkbox"/> GRANT MANAGEMENT SYSTEM (GMS)	<input type="checkbox"/> BUDGET DEVELOPMENT (FOR COUNTY BUDGET PREPARATION)	<input type="checkbox"/> PROPERTY TAX REVENUES REPORTING SYSTEM	<input type="checkbox"/> CAPITAL IMPROVEMENT PLAN SYSTEM (CIP)		<input type="checkbox"/> FIN 2 / 5 - Reports	<input type="checkbox"/> PROPERTY TAX REVENUES REPORTING SYSTEM	<input type="checkbox"/> FIN 2 / 5 - Posting Rights <small>(For County Education Office Only)</small>	
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3	User Information - All information is required unless otherwise noted (please print)	
	_____ USER LOGIN (ALL MUST BE IN CAPS)	_____ COUNTY EMPLOYEE ID <small>(IF APPLICABLE)</small>
	_____ USER FULL NAME	_____ TELEPHONE NUMBER
	_____ USER JOB TITLE	_____ EMAIL ADDRESS
	_____ DEPARTMENT / AGENCY NAME	_____ DEPARTMENT NUMBER <small>(IF APPLICABLE)</small>

4	Authorization - To be completed by the Business Manager, Chief Financial Officer, or higher level of management	
	_____ AUTHORIZING SIGNATURE	_____ TELEPHONE NUMBER
	_____ PRINT FULL NAME	_____ DATE
	_____ JOB TITLE	

5	For schools and special districts ONLY.	
	Remote Access - Check only if applicable <input type="checkbox"/>	
	A PC(s) will be used in a location outside the SB County Network. I certify that I have read and followed the "Auditor Remote Desktop Installation Instructions" and all virus, router, or wireless connections (if any) have been configured as required on all PCs to be used to obtain the remote access.	
	_____ PHONE	_____ COMPUTER SUPPORT TECHNICIAN'S SIGNATURE
	_____ PRINT NAME	

FOR AUDITOR USE	Routing checklist - Initial & date when complete.			
			E-MAIL SENT by: on:	COMPLETED by: on:
	Add to Server/FIN - Email to _____	_____	_____	_____
	Add to SalMod/BudDev/CIP/GMS - Email to _____	_____	_____	_____
	Remote Access _____	_____	_____	_____
Contact User _____	_____	_____	_____	