



Advance Additional Access Request Form

This form must be completed and the appropriate approval obtained before the required access could be given to a user.

Personal Details

Name : _____
Last Name (please print) First Name Given Name Title

Position : _____

Department/ : _____ Faculty/ : _____
Unit Division

Campus : Berwick Caulfield Clayton Gippsland
Parkville Peninsula Sunway Malaysia

Email Address : _____ Phone : _____

Access Request Details

1. Please indicate the area(s) below where access is/are required

- _____
- _____
- _____
- _____
- _____
- _____

2. How will the access to the above area(s) assist you in your work?

Note It is mandatory for all users to attend a workshop in the respective areas before access can be given to these windows in the Advance system.

Declaration by Staff Member

I understand that access to use the Advance system is subject to appropriate approval obtained. I will comply with all legal requirements and University policies on matters of privacy, including the laws relating to the collection, use and disclosure of personal information (refer: www.privacy.monash.edu.au). I understand that if I breach any of the above requirements, I will be liable for this breach and it will be regarded as a serious breach of my contract of employment with the University. I understand that the University may take appropriate disciplinary and/or legal action, for such breach.

Signature

Date

Contact Ext No

Authorization by Organizational Unit

Signature 1

Supervisor

Date

Please Print Name _____

Signature 2

Head of Unit

Date

Please Print Name _____

Authorisation by Development Database Services

Rights Group :

Advance ID : _____

UserGroup :

Authorised by – Print Name

Date

Action Taken By – Print Name

Date

Please return this form to
Business Systems Services
Advancement Division
Bldg 58, Room G04,
Clayton Campus