

SAP Departmental Access Request Form

User's Name: _____ Department: _____

Employee Number: _____ Position Number: _____ User's CWID: _____

New User Change Access Position Change (Will replace existing access as noted in this form) Deactivate SAP ID

Department Admin/Designee

Clinical Department Admin/Designee

DA__ DD__ Fund Center(s) _____
 DA__ DD__ Fund/WBS _____
 DA__ DD__ Fund/WBS _____
 DA__ DD__ Fund/WBS _____
 DA__ DD__ Fund/WBS _____

Time Keeper (Optional)
 Main__ Backup__
 Sub Area _____
 Sub Area _____
 Sub Area _____

Time Administrator (Default)
 Main__ Backup__
 Sub Area _____
 Sub Area _____
 Sub Area _____

PCARD Access: Please fill out the form located [HERE](#)

Default Roles:

<input checked="" type="checkbox"/> Purchasing Req. Entry	<input checked="" type="checkbox"/> Change of Funding Entry	<input type="checkbox"/> Clinical Only	<input type="checkbox"/> Clinical-BAC/SUP
<input checked="" type="checkbox"/> Purchasing Goods Receipt	<input checked="" type="checkbox"/> Time Administrator		
<input checked="" type="checkbox"/> Purchase Reporting			

Divisional Administrator

Fund Center(s) _____
 Fund/WBS _____
 Fund/WBS _____
 Fund/WBS _____
 Fund/WBS _____

Time Keeper (Optional)
 Main__ Backup__
 Sub Area _____
 Sub Area _____
 Sub Area _____

Time Administrator (Default)
 Main__ Backup__
 Sub Area _____
 Sub Area _____
 Sub Area _____

Change of Funding (Optional)

Fund Center(s) _____
 Fund/WBS _____
 Fund/WBS _____
 Fund/WBS _____

Clinical-SUP (Optional)

Fund Center(s) _____
 Fund/WBS _____
 Fund/WBS _____
 Fund/WBS _____

PCARD Access: Please fill out the form located [HERE](#)

Default Roles:

<input checked="" type="checkbox"/> Purchasing Req. Entry	<input checked="" type="checkbox"/> Purchase Reporting	<input checked="" type="checkbox"/> Purchasing Goods Receipt	<input checked="" type="checkbox"/> Time Administrator
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Non-DA/DD/DivA Procurement Access

Purchasing Req Entry Purchase Reporting Purchasing Goods Receipt
 SRM RARC Appr SRM OHP Appr SRM ITS-NY Appr

PCARD Access: Please fill out the form located [HERE](#)

Non-DA/DD/DivA Compensation Access

Change of Funding Clinical-SUP Clinical-Supp-PO Appr
 Fund Center _____ Fund Center _____ Clinical-Supp/Fund NYPH Appr

Non-DA/DD/DivA Time Management Access

Time Keeper	Time Administrator
Main__ Backup__	Main__ Backup__
Sub Area _____	Sub Area _____
Sub Area _____	Sub Area _____
Sub Area _____	Sub Area _____

Non-DA/DD/DivA BI Reporting Access

BI FM/GM Reporting BI HR Reporting (Excl. Payroll)
 BI SRM/AP Reporting BI Payroll Reporting (Payroll Only)

Fund Center _____ Fund Center _____ Fund Center _____ Fund Center _____

Additional Comments:

Training: All positions requested require that you attend a training session. To schedule a training session, please contact the training team at: wbg-training@med.cornell.edu

The DA/DD must attach the completed request form within GRC by opening a GRC Request. To open a GRC request, log in to the [WBG](#) and click on the "GRC" tab followed by the "Compliant User Provisioning" link.

I AM AWARE OF AND AGREE TO COMPLY WITH WCMC POLICIES AND PROCEDURES PERTAINING TO THE PROPRIETARY AND CONFIDENTIAL NATURE OF THE INFORMATION TO WHICH I MAY HAVE ACCESS.

Users Signature: _____ Date: _____

DA/DD Signature: _____ Date: _____

WBG Department BI Reports

	Process Area	Report Name	BI FM/GM Reporting	BI SRM/AP Reporting	BI HR Reporting	BI Payroll Reporting
1	FI-Funds & Grants	Discretionary Fund Statement (4*, 5*, 6*, 8*)	X			
2	FI-Funds & Grants	Fund Budget Statement (Expenses) (12* Funds)	X			
3	FI-Funds & Grants	Fund Detail Statement	X			
4	FI-Funds & Grants	Fund Master Data	X			
5	FI-Funds & Grants	Fund Responsible Assignments	X			
6	FI-Funds & Grants	Fund Statement (1* / 3*)	X			
7	FI-Funds & Grants	Funds Reservation Details by Fund	X			
8	FI-Funds & Grants	Funds Reservation Details by WBS	X			
9	FI-Funds & Grants	Grant Detail Statement	X			
10	FI-Funds & Grants	Grant Responsible Assignments	X			
11	FI-Funds & Grants	Grant Statement	X			
12	FI-Funds & Grants	Journal Voucher Details by Fund	X			
13	FI-Funds & Grants	Journal Voucher Details by SP	X			
14	FI-Funds & Grants	Open Commitments by SP	X			
15	FI-Funds & Grants	Open Purchase Order Commitments by Fund	X			
16	FI-Funds & Grants	PO Fund Statement	X			
17	FI-Funds & Grants	Project Fund Statement	X			
18	FI-Funds & Grants	Sponsored Program Master Data	X			
19	FI-SRM/AP	Accounts Payable Details by Fund		X		
20	FI-SRM/AP	Accounts Payable Details by SP		X		
21	FI-SRM/AP	Good Receipt Details by Fund		X		
22	FI-SRM/AP	Good Receipt Details by SP		X		
23	FI-SRM/AP	Invoice/Purchase Order Summary		X		
24	FI-SRM/AP	Line of Credit Order Details		X		
25	FI-SRM/AP	Purchase Order Details by Fund		X		
26	FI-SRM/AP	Purchase Order Details by SP		X		
27	FI-SRM/AP	Shopping Cart Approval Trail		X		
28	FI-SRM/AP	Shopping Cart by Status		X		
29	FI-SRM/AP	Shopping Cart Details		X		
30	HR-Personnel	Employee Action History			X	
31	HR-Personnel	Employee Basic Data			X	
32	HR-Personnel	Number of personnel actions by start date			X	
33	HR-Payroll	Employee Planned Funding by Fund				X
34	HR-Payroll	Employee Planned Funding by Org Unit				X
35	HR-Payroll	Employee Planned Funding by WBS				X
36	HR-Payroll	Labor Commitment/Consumption Details by Fund				X
37	HR-Payroll	Labor Commitment/Consumption Details by Org Unit				X
38	HR-Payroll	Labor Commitment/Consumption Details by SP				X
39	HR-Payroll	Labor Distribution by Fund				X
40	HR-Payroll	Labor Distribution by Org Unit				X
41	HR-Payroll	Labor Distribution by WBS				X