

ERP SYSTEM ACCESS POLICY

POLICY NO.	315-005
SCOPE	All Faculty, Staff and Administrators
APPROVAL	Senior Management Team
ORIGINAL DATE	July 28, 2011
LAST REVISION	
NEXT REVISION	July, 2016
CONTACT	Director, Computer Services

1 PREAMBLE AND PURPOSE

In recognition of the fact that NSCAD University's ("NSCAD") Enterprise Resource Planning system (currently Datatel Colleague) ("ERP System") is a large system to which employees will require access, this policy is intended to provide a mechanism to grant access to portions of the ERP System. This form should be completed for both new employees and current employees who are being granted access to the ERP System.

2 GRANTING ACCESS

The user who requires access to the ERP System should contact Computer Services and/or a Designated Contact (see Appendix A for a list of Designated Contacts) first to determine to which module they require access. Once this has been determined, the form attached as Appendix B should be completed and submitted to Computer Services. Once the completed form has been submitted to Computer Services, Computer Services will grant the requested access to the ERP System.

3 QUESTIONS

Any questions regarding this policy should be directed to the Computer Services department.

4 APPENDIX A

ERP System: Datatel Colleague

<u>Module</u>	<u>Responsible Area</u>	<u>Designated Contact</u>
UT (Utilities)	Computer Services	Director of Computer Services
ST (Student)	Student Services	Registrar
HR (Human Resources/Payroll)	Human Resources	Director of Human Resources
CF (Finance)	Finance and Admin.	Vice-President, Finance and Admin. or Director of Finance
CORE (Core)	All	At least two of the people above

5 APPENDIX B

ERP SYSTEM ACCESS REQUEST

Date: _____

Name: _____

Title/Position: _____

Division/Department: _____

Phone: _____

Module(s) to which access is/are being requested: _____

Screens/Mneumonics to which access is/are being requested: _____

I acknowledge that I have read and agree to be bound by the NSCAD University Acceptable Use Policy as amended from time to time as well as any rules set out by NSCAD when using NSCAD Computing Resources.

Signature of Applicant: _____

Chair/Director of Applicant's Department: _____

(Please print)

Signature of Chair/Director of Applicant's Department: _____

Designated Contact(s): _____

(Please print)

Signature of Designated Contact(s): _____

WHEN COMPLETED SEND TO: Computer Services

FOR OFFICE USE ONLY
Username: _____
Security Classes: _____
Date: _____