TIME & EFFORT DEPARTMENTAL ADMINISTRATOR ACCESS REQUEST

By logging on to this computer system, I acknowledge my responsibility for strictly adhering to university policy and state and federal law. I also am aware that penalties exist for unauthorized access, unauthorized use, or unauthorized distribution of information.

Employee Name (Print clearly)	Employee Signature	Department
Employee UIN	Employee Title	Phone Number

Access Requested: please denote with a checkmark (☑)

Update Access	Read Only	Please list ADLOC's Requested:

Administrative Verification Option:
Departments can elect to "preview" the certification documents before the documents are made available to the employees and managers. This is an "opt in" feature and is not required. Check option below.

Yes ☐ No ☐ **Require Administrative Verification** – *If this option is selected, T&E documents will appear in the Departmental Administrator's Inbox for verification prior to releasing documents to the PI's and managers*.

Supervisor Signature Date

Return this form to timeandeffort@tamu.edu

For Administrative use only

Received Date: _____

Set Up by: _____
Initials date

Scanned _____
Initials date