



**BANNER ACCESS REQUEST
FINANCIAL AID SERVICES**

USER INFORMATION

Name: _____ CWID: _____

Title: _____ Department: _____

Email: _____ Phone: _____

Please indicate specific access you are requesting:

Accounts Receivable

Recruiters

Administrative

Roll

Admissions

Rules

Athletics

Scholarship

Casual Wage Employee

Student Workers – Level I

Counselors – Customer Service

Student Workers – Level II

Mid-Level

University Planning

Payroll

Warhawk ID Office

By signing this form, I understand that all information I access in Banner are for the sole purpose of ULM business. Any abuse or unauthorized use will result in my access being revoked.

Employee Signature: _____ Date: _____

Employee's Department Head/Manager Signature: _____

***After completing this form and obtaining your Department Head's signature,
deliver form to the Office of Financial Aid Services.***

Financial Aid Authorizing Agent Signature: _____ Date: _____

Computing Center: Completed by: _____ Date: _____