

SUNY Buffalo State
PI DASHBOARD & RF ACCOUNT INFORMATION REPORTING

Please review the requirements on the next page and obtain the appropriate authorization(s)

Section I: Required User Information for RF Business Applications

Complete this section to request that a new user be added to the RF Business Applications or if a change has occurred.

New Change of Access Leave of Absence Termination Date _____



Name (Last, First, MI): _____

Campus Department: _____

Title: _____ Phone: _____

Email Address: _____ HR Person Number: _____

Start Date: _____ End Date (if Applicable): _____



Section II: Required Access Information for RF Business Applications

Complete this section to determine the application(s) and the responsibilities requested. If additional space is required to list additional responsibilities, attach a separate document.

PI Report Center/Dashboard Responsibilities:

- Add Delete **PI Dashboard- Restrict Principal Investigator (inquiry only access to all tabs on Dashboard called Principal Investigator)**
- Add Delete **Manager Self Service- MSS Originator (ability to create/change an RF appointment form)**
- Add Delete **Manager Self Service- MSS Approver (ability to approve HR transactions, i.e. timesheets)**
***Important – Other than the PI, an Individual should not be both an MSS originator and MSS approver.**

Security Value: *This is the value of the chosen security type. Examples of security values are listed.*

Organization Security Value: _____
(Access to entire department)

Award(s) Security Value: _____
(Access to entire award and all associated projects and tasks)

Project(s) Security Value: _____
(Access to entire project and all associated tasks)

Task(s) Security Value: _____
(Access to only a specific task. List the task and the project number associated.)

Key Member Security Value: _____
(List name of person chosen as Key Member in which specific awards, projects and tasks are associated) e.g.: Smith, Dr. John or Ms. Jane Smith, Administrator)

Section III: Required Signatures for RF Business Applications

The user's signature on this form is acknowledgement that they will safeguard the system assets assigned to them and prevent unauthorized use of RF Business Applications.

User Signature

Date



Supervisor must sign the form. The supervisor's signature on this form is authorization to add the user to RF Business Applications and confirmation that the user requires access to RF Business Applications to perform job duties. The supervisor will notify the campus security contact of user termination or transfer.

Supervisor Signature

Date

Campus security contact's signature on this form is authorization to grant access and to confirm accuracy of data.

Campus Security Contact Signature

Date

Return completed form to Lisa Gatti at scan gattila@buffalostate.edu or FAX to 878-4039.