

Spring Independent School District

Office of Financial Services

16717 Ella Blvd. • Houston, Texas 77090 • Tel. 281.891.6076



eFinancePlus Access Request Form

**Instructions: 1) Download this form (don't open it from your email) 2) Fill it out electronically
3) Sign it digitally 4) E-mail it to wwestbro@springisd.org**

Requester Information
Date: _____
Campus/Dept: _____
Name: _____
Position: _____
Digital Signature: _____

End User Information
Name: _____
Position: _____
Department: _____
Previous Person in this position: _____
Workflow Approval Group (if applicable): _____

Required Access New End User (Example: Purchase Requisitions, Payroll, Budget Transfers, Etc)	Required Access Existing End User (Example: Purchase Requisitions, Payroll, Budget Transfers, Etc)
<input type="checkbox"/> ADD Specify: _____ _____ _____	<input type="checkbox"/> ADD Specify: _____ <input type="checkbox"/> MODIFY Specify: _____ <input type="checkbox"/> DELETE Specify: _____

Finance Department Only
<u>Budget Information:</u> Project(s): _____ Budget Unit (if applicable): _____ Account(s) (if applicable): _____ CFO's digital signature: _____