

LaserFiche Access Application University of Houston-Victoria

I, _____, in my capacity as _____
(Print Full Name) (Title)

in the _____ request on-line access to UHV information through LaserFiche.
(Division or Department)

Signature of Applicant Title Date

I agree that the employee applicant has an academic/administrative need to access the LaserFiche database system and I will notify Information Technology in writing should the employee resign, transfer, or be terminated.

Signature of Supervisor Title Date

Signature of Department Head Title Date

*Please check the **database(s)** and **type(s)** of access the applicant will need, and forward to the department(s) for appropriate approval(s). Once the departmental approval is complete, please forward to Information Technology.*

Department*	Permission	Departmental Approval		
<input type="checkbox"/> Admission and Records	<input type="checkbox"/> View <input type="checkbox"/> Edit <input type="checkbox"/> Delete	_____	_____	_____
		Admissions and Records Approval	Title	Date
<input type="checkbox"/> Business Services	<input type="checkbox"/> View <input type="checkbox"/> Edit <input type="checkbox"/> Delete	_____	_____	_____
		Business Services Approval	Title	Date
<input type="checkbox"/> Financial Aid	<input type="checkbox"/> View <input type="checkbox"/> Edit <input type="checkbox"/> Delete	_____	_____	_____
		Financial Aid Approval	Title	Date
<input type="checkbox"/> Information Technology	<input type="checkbox"/> View <input type="checkbox"/> Edit <input type="checkbox"/> Delete	_____	_____	_____
		Information Technology Approval	Title	Date
<input type="checkbox"/> Human Resources	<input type="checkbox"/> View <input type="checkbox"/> Edit <input type="checkbox"/> Delete	_____	_____	_____
		Human Resources Approval	Title	Date
<input type="checkbox"/> Regional Outreach/ LEAD	<input type="checkbox"/> View <input type="checkbox"/> Edit <input type="checkbox"/> Delete	_____	_____	_____
		Regional Outreach/LEAD Approval	Title	Date
<input type="checkbox"/> School Of Business Admin.	<input type="checkbox"/> View <input type="checkbox"/> Edit <input type="checkbox"/> Delete	_____	_____	_____
		School of Business Administration	Title	Date

LaserFiche User ID: _____ Account Created: _____

** Certain departments may require additional forms for granting access to their database. Please contact each department to determine what is needed.*