[ ]  American River College

**FA File Share Access**

**Request Form**

**LOS RIOS**

COMMUNITY

COLLEGE

DISTRICT

[ ]  Cosumnes River College

[ ]  District Office

[ ]  Folsom Lake College

[ ]  Sacramento City College

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Requestor Information** |  |  |  |  |
|  |
| Last Name: |  | First Name: |  | M.I.: |       |  |
|  |
| Emplid #:  |  | Email Address: |  | Work Phone: |  |  |
|  |
| Department: |  | Job Title: |  |  |
|  |
| **Fileshare Information** |
|  |
| [ ]  | **Create New Folder\*** | [ ]  | **Create Sub Folder\*** | [ ]  | **Modify Users Access** |
|  | New folder name:       | Sub Folder Name:       |  |  |
|   |
| **\*Folder Path:**  | **(for each college)** |  |
|  *(example: \\do-cit01\psfiles\GeneralAccount\R2T2)* |
| **Users access to Folder:** |
| **Read Only** | **Modify** | **Remove**  | **Name (First & Last)** | **Emplid** | **Job Title** | **AD Access Group Name/****Folder Path** |  |
| [ ]  | [ ]  | [ ]  |  |  |  | See above |  |
|  |  |  |  |  |  |  |  |
|  |
|  | Reasons/Justifications:       |  |
|  |
|  | Requestor’s Signature: |         | Date: |       |  |
|  |
|  | Approver Signature: |       | Date: |       |  |
|  |  | Level 1: Fileshare Data Owner – Dept. Supervisor |  |
|  |  |  |  |  |  |
|  |  |       | Date: |       |  |
|  |  | Level 2: Fileshare Data Owner – Dept. Director/Dean      | Date: |       |  |
|  |  | \*FA New Folder: Roy Beckhorn, FA Systems Director |  |  |  |
|  |  |  |  |  |  |

***\* New folder requests within the Financial Aid folders will have to be approved by the FA advisory board before processing.***

|  |
| --- |
| **To be completed by the Security Administrator:** |
| [ ]  Request Process |  | [ ]  Notification Sent |  |  |
|  |  |  |  |  |
| Completed by: |       | Date: |       |  |
|  |  |  |  |  |