

## CONGA CONTRACTS SYSTEM ACCESS REQUEST FORM: CONTRACT OWNER OR APPROVER

Use this form to request a change in access in Conga Contracts **for a user from a participating central contracting unit (CCU) with a *Contract Owner* role OR a department user with a *Contract Approver* role.**

**Instructions:**

All fields of the form below must be completed, and your request must be approved by the appropriate department leader(s). Please email your completed request form to [help@miami.edu](mailto:help@miami.edu) from your UM email account. You will be notified once changes requested have been completed.

<b>SECTION A: USER DETAILS</b>			
<b>Date of Request:</b>	<b>UM Email:</b>		
<b>Name:</b>	<b>CaneID:</b>		
<b>Phone:</b>	<b>Employee ID:</b>		
Note: You are responsible for obtaining appropriate approval(s) as required for the change(s) being requested prior to submitting this access request form.			
<b>SECTION B: ACCESS REQUEST</b>			
<b>Department: (Check one)</b>			
<b>Central Contracting Units:</b>	<b>Departments with Contract Approver Role:</b>		
<input type="checkbox"/> Contract Administration (Business Services) <input type="checkbox"/> General Counsel <input type="checkbox"/> Purchasing (Academy) <input type="checkbox"/> UHealth Supply Chain Services	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none; vertical-align: top;"> <input type="checkbox"/> Clinical Engineering  <input type="checkbox"/> CEPD  <input type="checkbox"/> Control  <input type="checkbox"/> Facilities  <input type="checkbox"/> Human Resources  <input type="checkbox"/> Real Estate  <input type="checkbox"/> Office of Technology Transfer (OTT)  <input type="checkbox"/> Office of Research Administration (ORA)                 </td> <td style="width: 50%; border: none; vertical-align: top;"> <input type="checkbox"/> PCI Compliance  <input type="checkbox"/> Treasury  <input type="checkbox"/> Value Analysis  <input type="checkbox"/> UHealth Information Technology (UHIT)  <input type="checkbox"/> University of Miami Information Technology (UMIT)  <input type="checkbox"/> Other (Please explain):                 </td> </tr> </table>	<input type="checkbox"/> Clinical Engineering <input type="checkbox"/> CEPD <input type="checkbox"/> Control <input type="checkbox"/> Facilities <input type="checkbox"/> Human Resources <input type="checkbox"/> Real Estate <input type="checkbox"/> Office of Technology Transfer (OTT) <input type="checkbox"/> Office of Research Administration (ORA)	<input type="checkbox"/> PCI Compliance <input type="checkbox"/> Treasury <input type="checkbox"/> Value Analysis <input type="checkbox"/> UHealth Information Technology (UHIT) <input type="checkbox"/> University of Miami Information Technology (UMIT) <input type="checkbox"/> Other (Please explain):
<input type="checkbox"/> Clinical Engineering <input type="checkbox"/> CEPD <input type="checkbox"/> Control <input type="checkbox"/> Facilities <input type="checkbox"/> Human Resources <input type="checkbox"/> Real Estate <input type="checkbox"/> Office of Technology Transfer (OTT) <input type="checkbox"/> Office of Research Administration (ORA)	<input type="checkbox"/> PCI Compliance <input type="checkbox"/> Treasury <input type="checkbox"/> Value Analysis <input type="checkbox"/> UHealth Information Technology (UHIT) <input type="checkbox"/> University of Miami Information Technology (UMIT) <input type="checkbox"/> Other (Please explain):		
<b>Change(s) Requested: (Check all that apply)</b>			
<input type="checkbox"/> Add User <input type="checkbox"/> Remove User <input type="checkbox"/> Other (Please explain):	<input type="checkbox"/> Change User Role (ex: Contract Owner, Contract Approver, etc.) <input type="checkbox"/> Change User Functions (ex: Contract Admin, Contract Assigner, Procurement 300)		
<b>Please provide a detailed explanation of the change(s) requested:</b>			

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**SECTION C: APPROVAL(S)**

**ADDING A USER Only:** Complete the section below *if adding a user* to Conga Contracts.

**Dean, VP or Department Chair and Fiscal Officer Approval**

<b>Dean, VP or Department Chair:</b>	<b>Fiscal Officer:</b>
<p>I (Print Name) _____ certify that I have appropriate authority to approve this system access request on behalf of my department.</p> <p>(Signature) _____</p> <p>(Title) _____</p> <p>(Department Name) _____</p> <p>(Date) _____</p>	<p>I (Print Name) _____ certify that I have appropriate authority to approve costs associated with this system access request on behalf of my department.</p> <p>(Signature) _____</p> <p>(Title) _____</p> <p>(Department Name) _____</p> <p>(Date) _____</p>

**OTHER CHANGES (To add a user, complete approvals section above):** Complete the section below for all reasons *other than adding a user* to Conga Contracts.

**Department Leadership Approval**

<p>I (Print Name) _____ certify that I approve and have appropriate authority to approve this system access request on behalf of my department.</p>	
(Signature) _____	(Department Name) _____
(Title) _____	(Date) _____

**For Internal Use Only:**

Approved OR  Declined

If Declined, Reason for Declining: \_\_\_\_\_

Approved/Declined By: \_\_\_\_\_

Date Approved/Declined: \_\_\_\_\_

Date License Obtained: \_\_\_\_\_

Access Granted By: \_\_\_\_\_

Date Access Granted: \_\_\_\_\_