



Office of the
University Registrar

Chubb Hall
Athens OH 45701-2979

Complete Sections I – III. Return to Bob Bulow, Office of the University Registrar, Chubb Hall 110A.

Section I – Employee

Employee for whom access is requested.

Name: _____
(Last) (First) (Middle Initial)

College/Department/School: _____ Phone Number: _____

Title: _____ Oak ID: _____

Employee Signature: _____ Date: _____

Did this employee replace a previous employee who had access to acalog?

Yes No

Previous Employee: _____
(Last) (First) (Middle Initial)

Section II – Access

What type of access do you need?

- Dean’s Office – access to view and update text and program information for the following college and all departments and schools within:

Will department chairs/school directors have access to update their individual information?

Yes No

- Department Chair/School Director – access to view and edit text and program information for the following department/school:

Section III – Approval

Assistant/Associate Deans will be granted access without a signature of approval (although a form must be submitted). All others who request access must have approval from the appropriate assistant/associate dean.

I verify that the employee requesting access has a legitimate need to access the undergraduate catalog in a catalog to fulfill responsibilities within his/her current position. I will inform the Office of the University Registrar of any change in the employment status of this employee.

Assistant/Associate Dean Name: (Please Print) _____

Assistant/Associate Dean Signature: _____ Date: _____

Return this completed form (pages 1 - 2) to: Bob Bulow, Office of the Registrar, Chubb Hall
110A