

## FTK-Centre For Information Technology Jamia Millia Islamia

## MIS USER-ID REQUEST

| Employee's Name:   |                |     |   |                |                  |
|--|----------------|-----|---|----------------|------------------|
| Employee's Id:   |                |     |   |                |                  |
| Department /Centre/School/Office:  |                |     |   |                |                  |
| Official Email-id:   |                |     |   |                |                  |
| Contact Number:  |                |     |   |                |                  |
| Please put a tick ( ✓ ) mark in appropriate cells of the table given below to select the   |                |     |   |                |                  |
|  |                |     |   |                |                  |
| authoritarian request:   |                |     |   |                |                  |
| Name of the MIS/FAOIS  | Permission to  | Per | mission to  | Permission to  | Permission to    |
| Module   | view record(s) | ado | record(s)   | edit record(s) | delete Record(s) |
| Payroll /Self Service  |                |     |   |                |                  |
| Finance & Accounts   |                |     |   |                |                  |
| Student  |                |     |   |                |                  |
| Administration/FTS   |                |     |   |                |                  |
| Faculty /Employee  |                |     |   |                |                  |
| Project MS   |                |     |   |                |                  |
| Estate & Legal   |                |     |   |                |                  |
| Store  |                |     |   |                |                  |
| CDOE   |                |     |   |                |                  |
| Health   |                |     |   |                |                  |
| Hostel   |                |     |   |                |                  |
| Others   |                |     |   |                |                  |
| Recommendation of the Head of the Department/Director of the Centre/Head of Section:  The above authorization requests may be granted to |                |     |   |                |                  |
| Name & Signature<br>(With Stamp)   |                |     |   |                |                  |
| FOR FTK-CIT OFFICE USE   |                |     |   |                |                  |
| The ID as requested above may be created.  |                |     | The following ID has been created & communicated to the user:  User Id. |                |                  |
| Hon. Director, FTK-CIT   |                |     | Created by:   |                |                  |