



# Web Finance

Account Request/Change Form

- New Application
- Additional Funds/ Orgns

Scan and email completed and signed form to [drexel\\_finsec@drexel.edu](mailto:drexel_finsec@drexel.edu). If you have any questions or would like to schedule Web\*Finance training, please email [drexel\\_finsec@drexel.edu](mailto:drexel_finsec@drexel.edu)

Drexel University    
  Drexel University College of Medicine    
  Drexel University Online    
  Academy of Natural Sciences of Drexel University

Employee Name  Department

Phone Number  Employee ID  Email

Employee's Signature \_\_\_\_\_ Title  Date

User Information

Fund Code	Org Code	Cost Center Description
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>

### Approvals

Prepared by  Mail Stop  Location  Telephone  Date

Cost Center Administrator/PI (Print)  Signature \_\_\_\_\_ Date

Director/Dean (Print)  Signature \_\_\_\_\_ Date

Vice President (Print)  Signature \_\_\_\_\_ Date

### BSS Department Use Only

Sent to DBA's \_\_\_\_\_ Date \_\_\_\_\_    
 Done by DBA's \_\_\_\_\_ Date \_\_\_\_\_    
 Fzmccus Setup \_\_\_\_\_ Date \_\_\_\_\_    
 Notification Sent \_\_\_\_\_ Date \_\_\_\_\_

Financial Systems Administrator (Print Name) \_\_\_\_\_

Financial Systems Administrator Signature \_\_\_\_\_

Date \_\_\_\_\_