Request for Access to WVFIMS
(West Virginia Financial Information Management System)

Please   **ADD**   **CHANGE**   **DELETE**   the following WVFIMS User Profile

Date:

Organization Information

Org Name:

Division:

Address:

User Information

Non-FIMS Logon?   **YES**   **NO**

IS&C User ID: **Menu Group:**

First Name: **Last Name:**

Phone Number: **Extension:**

User Org Number: **Payroll Inquiry?**   **YES**   **NO**

Authorization Org Number: **Comment On 'COM'/'DEL' Documents?**   **YES**   **NO**

Transaction Approval?   **YES**   **NO**

Signature Sheet Entry?   **YES**   **NO**

CICS Printer ID: **Off Systems Auth:**

E-Mail Address:

Agency Department Head: _____   **Date:** _____

TO BE COMPLETED BY WVFIMS STAFF)

System Entry Completed By: _____   **Date:** _____

RACF Connect_____   **RACF Disconnect**_____