

PROCUREMENT SERVICES

Purchasing Workflow Setup Request

Last Name		First Name		EmplID		
Department		Phone Number		E-mail Address		
Purchasing Workflow R	oles (Che	ck only the boxes in t	he section that applie	s to your status)		
I do not have signature authority on the budgets listed below. I only need access to enter requisitions.		I am listed as a signature authority for the budgets listed below. I need access to authorize requisitions.		I am a staff member in Sponsored Programs Administration.		
Req Entry Validator		Approver 1 Approver 2 (budget authority)		Approver 3		
Route Control Profiles	(List all bud	gets that you may use	when entering a req	uisition.)		
Business Unit: (Choose one)	USMP	O (Hattiesburg, Stennis)	USMGC (Gulf	Coast) US	SMPP (Physical Plant)	
Department Number (6 digits)			Project/Grant Num	ber (DE and/or GR)		
This request is a:	ew Entry	Change/Upda	te			
For Approver access granted be the access code listed at the element			ere:			
A signature autho	ority for the b	oudgets listed above n	nust sign this form as	the Department A	Authorization	
Department Authorization:				Date		
Purchasing Authorization:				Date		