REQUEST FOR SETUP OR CHANGE - ADMINISTRATIVE MANAGEMENT SYSTEMS (AMS)

MY RESEARCH ON-LINE ACCESS (MROL)

CONFIDENTIAL when completed. Fax to: AMS HQ 215 Huron Street, 4th floor, 416-971-2426

1. Complete the following information to identify yourself:

Name: 
  Last name (Please print): 
  First name: 
  Initial:

  Department/Faculty: 
  Personnel Number 
  Date 

Please indicate your role
  PI [ ] Business Officer [ ] Project Mgr/Assistant [ ]

AMS ID: 
Phone: 

Check one: Setup new AMS ID [ ] Update existing AMS ID [ ] Delete AMS ID [ ]

2. FIS only - Enter the commitment fund centre(s) and mark for addition or deletion. If an entire commitment fund hierarchy is required, list only the fund centre at the top of the hierarchy.

<table>
<thead>
<tr>
<th>Commitment Fund Centre Number</th>
<th>Commitment Fund Centre Description</th>
<th>Addition</th>
<th>Deletion</th>
<th>User ID (office use only)</th>
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3. Form must contain Contact Person for PI role only

  Person to contact (Please print) 
  Title 
  Univ. Tel.#

  E-Mail address

4. Form must include: Department Head’s signature of approval for PI or Business Officer role
  PI’s signature of approval for the Project Manager/Assistant role

  Authorized by (please print) 
  Phone 
  Title

  Signature 
  Date