

**Montclair State University
Application for FRS Access**

Applicant's Name: _____

Applicant's Ext: _____

Department Name: _____

Account Numbers(s): _____

Address: _____

Type of access requested:

Inquiry only

Inquiry and on-line requisitioning

Approve on-line requisitioning (Fiscal Agent only)

If the employee is replacing someone who has current access,
please list that person's name. _____

Fiscal Agent Approval: _____ Date: _____

Financial & Accounting Services
Bryant Hall 222
7373