

University of Oregon, Registrar's Office

Singularity Permissions Form

Instructions:

Have the user fill out their personal information about themselves below. Return this form to the approving department's Singularity Administrator. A Singularity Administrator for the approving department will then select which groups this user should be added to by placing a check in the box next to the name of the group.

Name: Telephone:

Department: Job Title:

E-mail address: UO ID:

Check one: Faculty GTF* Staff Student* Other (please specify)

(please check one) **New User** **Change Access**

(please check all that apply) **Singularity Production** **Singularity Test**

The abilities of users within the system are controlled by permissions that are available in groups. By adding a user to a particular group, that user is then granted the abilities that are within the group. To remove abilities of a user, removing them from the group that permits the abilities is all that is needed.

For record keeping purposes, this document needs to specify the functions and groups a user is to be assigned, giving that user the permissions of each group.

Functions

<p style="text-align: center;">Basic</p> <p><input type="checkbox"/> Access</p> <p><input type="checkbox"/> Print</p> <p><input type="checkbox"/> Annotate</p> <p><input type="checkbox"/> My Doc Cart</p>	<p style="text-align: center;">Advanced</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Delete Doc</td> <td><input type="checkbox"/> Form Submit</td> </tr> <tr> <td><input type="checkbox"/> Delete Page</td> <td><input type="checkbox"/> Form View</td> </tr> <tr> <td><input type="checkbox"/> Doc Cart Email</td> <td><input type="checkbox"/> Index Module Admin</td> </tr> <tr> <td><input type="checkbox"/> Doc Status</td> <td><input type="checkbox"/> Move Document</td> </tr> <tr> <td></td> <td>Other _____</td> </tr> </table>	<input type="checkbox"/> Delete Doc	<input type="checkbox"/> Form Submit	<input type="checkbox"/> Delete Page	<input type="checkbox"/> Form View	<input type="checkbox"/> Doc Cart Email	<input type="checkbox"/> Index Module Admin	<input type="checkbox"/> Doc Status	<input type="checkbox"/> Move Document		Other _____
<input type="checkbox"/> Delete Doc	<input type="checkbox"/> Form Submit										
<input type="checkbox"/> Delete Page	<input type="checkbox"/> Form View										
<input type="checkbox"/> Doc Cart Email	<input type="checkbox"/> Index Module Admin										
<input type="checkbox"/> Doc Status	<input type="checkbox"/> Move Document										
	Other _____										

Groups

<input type="checkbox"/> Domestic Transcripts	<input type="checkbox"/> Other _____
<input type="checkbox"/> International Transcripts	_____
<input type="checkbox"/> Graduation	_____
<input type="checkbox"/> Record Specialist	_____
<input type="checkbox"/> Workflow Administrator	_____

_____	_____	_____
<i>(your name - printed)</i>	<i>(your signature)</i>	<i>(date)</i>
_____	_____	_____
<i>(Dean/Department head - printed)</i>	<i>(signature of Dean/Department head)</i>	<i>(date)</i>
_____	_____	_____
<i>(Approving Department Manager - printed)</i>	<i>(signature of Approving Department Manager)</i>	<i>(date)</i>
_____	_____	_____
<i>(Singularity Administrator - printed)</i>	<i>(signature of Singularity Administrator)</i>	<i>(date)</i>