KARATINA UNIVERSITY
ICT DIRECTORATE

ERP USER RIGHTS APPLICATION FORM

USER INFORMATION

FULL NAME:		PF. NUMBER:	

EMAIL ADDRESS		DEPARTMENT	

REASON FOR ACCESS	DATE AND SIGNATURE

If ERP, Please tick the Access Rights requested at the back of this form

COMMENT BY DEAN/ HEAD OF DEPARTMENT/ HEAD OF SECTION

NAME:		DATE:	

RECOMMEND OR DECLINE	SIGNATURE

COMMENT BY REGISTRAR PLANNING AND ADMINISTRATION

NAME:		DATE:	

APPROVE OR DECLINE	SIGNATURE

ACTION BY ICT DIRECTORATE

NAME:		DATE:	

COMMENT		USER DETAILS:	
		USERNAME:	PROVINCIAL PASSWORD:

SELECT/ TICK THE REQUESTED RIGHTS

Modules	Sub-modules	View	Edit	Add	Delete	All
Finance	1. Student Finance					
	2. Fixed Assets					
	3. Cash Management					
	4. Claims					
	5. Imprest Management					
	6. General Ledger					
	7. Payroll					
Procurement	1. Planning					
	2. Order Processing					
	3. Inventory and Costing					
Student Management	1. Admissions					
	2. Class Management					
	3. Alumnae					
	4. Timetable					
	5. Student Welfare					
Exam Management	1. Exam Processing					
	2. Exam Reports					
	3. Exam Preparation					
Catering	1. Catering Store					
	2. Daily Menu					
	3. Sale Points					
Hostel	1. Room Allocation					
	2. Room Management					

Hospital	1. Registration					
	2. Appointments					
	3. Doctors Visit					
	4. Laboratory					
	5. Pharmacy					
	6. Immunizations					
	7. Referrals					
Human Resource	1. Employee Management					
	2. Welfare					
	3. Leave Management					
	4. Staffing					
	5. Disciplinary					
	6. Performance					
	7. Training					
	8. Recruitment					
	9. Communication					
Transport	1. Transport Requisition					
	2. Maintenance					
	3. Fuel Request					
	4. Process					

Applicant Name:_____ **Signature:**_____ **Date:**_____

Dean/ Head of Department:_____ **Signature:**_____ **Date:**_____

Allocated by (ICT Staff):_____ **Signature:**_____ **Date:**_____