



### DegreeWorks Access Request Form

**If you have any questions about this form, please contact the Registrar's Office at 361-593-2811**

<b>PLEASE PRINT</b>		<b>Banner ID K</b> _____
_____	_____	_____
Last Name	First Name	Middle Name
Department _____		Phone _____
Please check if you are: <input type="checkbox"/> Faculty <input type="checkbox"/> Advisor <input type="checkbox"/> Other _____		
_____		UserID _____
Applicant Signature	Date	

Query Access (View Only)

Modify Access

_____	
Supervisor's Printed Name	
_____	_____
Supervisor's Signature	Date

<b>Permissions Authorized (Registrar Use Only):</b>	<b>DegreeWorks</b>
BANNER _____	_____
ADV _____	_____
ADVX _____	_____
_____	_____
DegreeWorks Admin Signature	Date