



**DEPARTMENT OF ADMINISTRATION**  
**Guam Financial Management Information System (GFMIS)**  
**USER SECURITY ACCESS REQUEST**



To: Director of Administration via: [GFMIS.Access@doa.guam.gov](mailto:GFMIS.Access@doa.guam.gov)

From: \_\_\_\_\_

Subject: **GFMIS User Security Access Request**

**Check One:**    New user                       Delete user                       Additional Access

**Name** \_\_\_\_\_  
Last, First (No Nicknames) M.I.

**Department:** \_\_\_\_\_ **Division:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_ **Employee ID No.:** \_\_\_\_\_

**Email (primary):** \_\_\_\_\_ **Active Directory ID:** \_\_\_\_\_  
pre-requisite, contact OTech

**Employment Type:**    Full-time/Permanent    Limited Term/Temporary    Contractor

Please check **User Category** and applicable Sub-Category(ies):

<input type="checkbox"/> <b>DOA Accounting/Treasury User</b> <i>(DOA staff only)</i> <input type="checkbox"/> Accounts Payable <input type="checkbox"/> Accounts Receivable <input type="checkbox"/> Budgeting <i>(information only)</i> <input type="checkbox"/> Cash and Banking <input type="checkbox"/> Federal Grants <input type="checkbox"/> Fixed Assets <input type="checkbox"/> General Ledger  <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> Technician <input type="checkbox"/> Timekeeper  <input type="checkbox"/> <b>Data Warehouse (DW)</b> <i>(report browser)</i>  <input type="checkbox"/> <b>Business Information Development System (BIDS)</b> <small>Note: Primarily for Certifying Officers    Online Application required</small>	<input type="checkbox"/> <b>Human Resources User</b> <i>(detail reason for access below)</i>  <input type="checkbox"/> <b>Federal Grants Module</b>  <input type="checkbox"/> <b>Customs and Quarantine User</b> Location: _____  <input type="checkbox"/> <b>External User</b> <i>(detail reason for access below) Reason</i> for access request (in detail): _____ _____ _____ <b>IMPORTANT: Approvals comply with DOA Organizational Circulars #2019-032, #2022-005, #2022-019 and #2022-026</b>
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**Conditions and Acceptance of User ID and Password by Employee:**

The User ID is authorized for the employee's exclusive use and is Government property. Employee's password must be safeguarded and protected from unauthorized persons. Use of the User ID/Password by other than the employee is an unauthorized use and could be prosecuted under Guam law. **\*IMPORTANT: USERS WILL BE DISABLED IF INACTIVE 30 DAYS OR MORE WITHOUT PRIOR NOTIFICATION\***

Employee Acceptance of Agreement: \_\_\_\_\_

Requestor's Department/Agency Head: \_\_\_\_\_

Print Name/Title: \_\_\_\_\_

<input type="checkbox"/> Approved <input type="checkbox"/> N/A	<input type="checkbox"/> Approved <input type="checkbox"/> N/A	<input type="checkbox"/> Approved <input type="checkbox"/> N/A	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
Chief Financial Officer	HR Administrator	Chief Payroll Officer	Director of Administration

**Department Of Administration (DOA) USE ONLY. This form has been routed to the following for their records:**

Requesting Agency   
  Office of Technology   
  GSA   
  HR   
  Payroll   
  BBMR