Commonwealth of Virginia

Bank of America

#### Works Access Request Form

This form is required for Agency designated employees who need Scoped Accountant, Scoped Approver or Scoped Auditor

Permissions to your agency’s Small Purchase Charge Card or Travel Card data using WORKS.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Number: \_\_\_\_\_\_\_\_\_\_

Agency Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program: Purchase Card (includes SPCC & Gold) \_\_\_\_\_\_\_\_ Travel Card (includes Employee Paid & ATC) \_\_\_\_\_\_\_\_

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role Requested: Accountant \_\_\_\_\_\_\_\_\_

 Approver \_\_\_\_\_\_\_\_\_\_\_ Group Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Auditor \_\_\_\_\_\_\_\_\_\_\_\_

Requested User ID: (Minimum of 9 characters)

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Certification**

I, Program Administrator, for the agency listed above, certify that the above named individual may receive the Works permission(s) indicated above. Scoped Accountant role to flag, sweep, and sign off on Works transactions, Scoped Approver role to flag and sign off on Works transactions for the group selected, and/or Scoped Auditor role to our Agency’s reporting and data for the Program(s) selected. I also certify that when this individual no longer requires access to Works or their access level needs to be changed I will immediately either delete the user from Works or modify their access.

Agency Program Administrator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DOA Use Only:**

DOA Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Setup Complete in Works: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ “Welcome Email Generated”: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_