**V.O.Chidambaranar Port Trust**

**EDP Centre**

 **User Authentication Form**

 (Requisition for allotting Functional IDs to users of SAP)

SAP User Id :

Employee No :

Name :

Designation :

Department :

**Details of Authentication Required :**

|  |  |  |
| --- | --- | --- |
| **S.No** | **SAP Module** | **SAP Transaction Code with Description** |
|
|  |  |  |
|  |  |  |
|  |  |  |

 **Signature of Section Officer**

To,

The Sr.Deputy Director,

EDP Centre.

(Note : Soft copy of this format is available in intranet under **Format** tab)

 **V.O.CHIDAMBARANAR PORT AUTHORITY**

**EDP CENTRE**

**User Authentication Form**

(Requisition for Granting/Revoking Functional IDs to users of SAP/EPIS)

 Date:

SAP User ID : EPIS User ID :

Employee No : Internal/External :

Name : Party code for External user :

Designation : Grant/Revoke :

Department : Employee No :

Mobile No. :

Details of Authentication Required :

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No** | **SAP /EPIS Module** | **SAP / EPIS Transaction code with Description** | **Access Required** |
| **Creation** | **Approval** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Signature of Requesting Officer**

 **HOD of Concerned Department**

**Recommendation of FA&CAO**

**Signature of SR.DD/EDP**

|  |
| --- |
| **For EDP use only** |
| Granted by :  |  | Date  |  |
| Revoked by : |  | Date  |  |

**Note:** Never share your User ID, Password and OTP