SEMS Access Request Form

SEMS (Student Employment Management System) requires a member of the business office staff to act as the coordinator for their department. The coordinator will be responsible for managing supervisors and approving work-study jobs. Business Administrator authorization is required.

Please choose one:  ____Add Coordinator  ____ New Coordinator  ____ Change Coordinator

Coordinator Information

Department Name: ___________________________________________ Organization #: ____________________________
(Official Name of the Department) (Required)
Department Name: ___________________________________________ Organization #: ____________________________
Department Name: ___________________________________________ Organization #: ____________________________
Department Name: ___________________________________________ Organization #: ____________________________

Title: _____  First Name: ___________________________  Last Name: ___________________________
(Mr., Mrs., Ms., Dr., Prof.)
Address Line 1: ___________________________________________  Phone: (_____) _______ - _____________
Address Line 2: ___________________________________________  Fax: (_____) _______ - _____________
Mail Code: _______  E-mail Address: ________________________________________________________________

Coordinator Signature: ___________________________________________  Date: ____________________________

Business Administrator Authorization

First Name: ___________________________  Last Name: ___________________________
Phone: (_____) _______ - _____________  E-mail Address: ________________________________________________________________

I authorize the above-mentioned person as the SEMS Coordinator for my department.

BA Signature: ___________________________________________  Date: __________________________

Fax to: 215-573-8974 or E-mail to: seomail@exchange.upenn.edu

SEO USE ONLY

DATE: ___________  INITIALS: ______