



Office of Financial Compliance for Research
RC and Department SPAR Access and Responsibility Acknowledgement Form

Please complete the following form to establish, modify or terminate RC or Department level access of the SPAR application through PRISM. Once completed, please return this form to Financial Compliance for Research at sparhelp@cfo.pitt.edu. If you have any questions, send an email to sparhelp@cfo.pitt.edu.

Please choose one: **New SPAR User** **Existing SPAR User** **Access Termination**

Effective Date: _____

SPAR User Full Name: _____ **Employee #:** _____

Department or Division Name: _____ **RC #:** _____ **Dept #:** _____

* Users need to have an active PRISM account. To activate an account, please go to <https://prism.pitt.edu/>.

Authorization:
 As the SPAR user, I affirm that I have read and understand the following University Policies and will abide by these policies, and use the requested data access only as required in the performance of my University duties.

10-02-04	Computer Data Administration
10-02-05	Data Access and Use
10-02-06	University Administrative Computer Data (UACD) Security and Privacy
11-01-07	Effort Reporting and Certification

SPAR User Signature: _____ **Date:** _____ **Phone:** _____

As the supervisor for the SPAR User, I affirm this request is in accordance with the SPAR Users' job function. I will be responsible for taking the appropriate change action, if the SPAR User has a change in employment status. I confirm that the SPAR User has attended the required training as noted below.

Training Attendance Dates:

Introduction to SPAR (required): _____

Effort Reporting for Research Administrators (required if area has sponsored research activity): _____

Advanced SPAR – Cost Sharing (required if area has sponsored research activity): _____

Workshop registration information and Instruction Guides for the SPAR application are available at <https://www.controller.pitt.edu/financial-compliance-for-research/workshops-registration/>

Supervisor Printed Name: _____

Supervisor Signature: _____ **Date:** _____ **Phone:** _____

Authorized RC Name: _____

Authorized RC Signature: _____ **Date:** _____ **Phone:** _____

SPAR Security updated by: _____
 Date: _____



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SPAR Application Responsibility Request

Please choose the appropriate level of SPAR responsibility and role. Roles will be entered, modified and/or deleted by Central Administration.

PLD RC SPAR Processing

Add Delete

Scope of access: SPAR user has access to all employees of the RC.

Administrator Modifier Viewer

Rights: For detailed information on rights assigned to each role, see the SPAR Security Matrix on our [website](#).

PLD Department SPAR Processing

Add Delete

Scope of access: SPAR user has access to all employees of the department.

Administrator Modifier Viewer

Rights: For detailed information on rights assigned to each role, see the SPAR Security Matrix on our [website](#).