

# iBuy+ Expense Reporting System Affiliate Access Form

Note: Before submitting this form, the individual must be a registered HRIS affiliate.

Please see <http://my.gwu.edu/mod/accounts/affiliates/index.cfm>

**\* Required Field**

*Name of individual requiring access	*GWID Number G _____	*NetID _____ @gwu.edu
--------------------------------------	-------------------------	--------------------------

*Sponsoring Org	*Affiliation creation confirmed date	*Affiliation projected end date
-----------------	--------------------------------------	---------------------------------

Note: User's access will be terminated on this date unless a new access request form is submitted.

\*Is the individual being issued a GW P-Card as part of their role?

Yes     No

Note: In general, affiliated users are not permitted to submit reimbursements for themselves. If there is any reason the affiliate may need to seek reimbursement please outline those in the description below.

\*Description of the role of the individual:

---

---

---

---

---

---

\*Finance Director Name:

## Required Signatures

\*Approving Manager Name:  \*Ext:

\*Electronic Signature:  \*Email:

\*Approval (for Finance Division use only):

**IMPORTANT:** This form is to be used to request access to iBuy+ eExpense System for a non-employee referred to as an affiliate user. An affiliate user can serve as a delegate for submitting expense reports on behalf of an employee or to serve as an approver of an expense report. In general, an affiliate user should not submit expenses for himself/herself. Complete this form in its entirety, including providing a complete description of the affiliate's responsibilities or role. The completed and approved form should be sent to [expense@gwu.edu](mailto:expense@gwu.edu). In the subject line of the email insert "iBuy+ Expense Reporting System Affiliate Access Form".

