

BA Email Address:

RCAB Systems Access Termination Form

Submit the completed form to HR@rcab.org

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Date:		
Person Name:		Job Title:
Location Name:		Institution Number:
Location Name:		Institution Number:
Termination Date:		
	OR TERMINATE ALL ACCESS II	MMEDIATELY Yes:
IF ACCESS IS SHOULD BE F		SYSTEMS, SELECT TO WHICH SYSTEMS ACCESS
Lay Benefits		Parish Services
BAS / MyEnroll - Benefits Administration		BA E-mail Address Access
BAS / MyEnroll Monthly Invoice		BK E-mail Address Access
Catholic Schools Office		Support Ticket Portal
Schoolopedia		ParishSoft Application
Finance		Adaptive Budget Software
Paylocity - Payroll		Donum App Parish Administrator
Sage Mateo - Savings and Loan		Donum App Parish User
Sage Intacct		Add additional comments or instructions here
If an employee leaves a position it is important to terminate access to all systems they should no longer have access too. Some of these systems store legally protected data.		
Approver name a	and Title*:	
Please complete name, job title, and location information		Approver Signature*
above.		*Must be signed by someone in authority at the location
For Pastoral Cente	er User Only:	

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