

EPAF Training Certification Form

This form must be completed by all employees upon completion of the training for EPAFs via Banner Self Service (BSS). Please submit this form to HR within two (2) days after completion of the applicable training session(s). All information on this form is required.

Employee's Name: _____ Employee Banner No. _____

Department: _____ Supervisor's Name: _____

Date Completed Training: _____

I, _____, do hereby certify that I have completed the training session for the below checked courses:

(Please check all that apply):

Originating EPAFs – All EPAF Originators must attend/complete this course in order to originate various EPAFs electronically via Self Service Banner.

Approving EPAFs – All EPAF Approvers must attend/complete this course in order to approve EPAFs electronically via Self Service Banner.

***Note to employee:** This form will be made a part of your personnel file. Please read and understand its contents before signing.*

I understand the training I have received and I can use BSS EPAFs properly.

Employee's signature

Date

Please submit completed form to the appropriate HR Office as shown below:

SUBR: fax: (225) 771-5617 or send via campus mail to Human Resources, J. S. Clark Annex, 1st Floor or via regular mail to Human Resources, P. O. Box 10400, Baton Rouge, LA 70813

SUNO: fax: (504) 284-5482 or send via campus mail to Human Resources, Park Campus, Administration 315 or via regular mail to Human Resources, Southern University at New Orleans, 6400 Press Drive, New Orleans, LA 70126

SUSLA: fax: (318) 676-5496 or send via campus mail to Human Resources, Leonard C. Barnes Administration Bldg, A17 or via regular mail to Human Resources, Southern University at Shreveport, 3050 Martin Luther King, Jr., Shreveport, LA 71107