

People's Republic Of Bangladesh

User Name:

Picture

iBAS++ User Registration Form for Autonomous Organisation

To be Completed by User (Applicant)							
Full Name (English)							
Full Name (Bangla)							
National Id No				Dat	e of Birth		
Email Id				Cel	Phone No		
Office Name							
Office Code	Ministry Department Autono			omous Organisation		Unit Office/ Project (if any)	
Title/Designation							
Signature (Applicant)				Date			
	[To	User Typ be Completed	e (Select Ai by Applica	_	rvisor]		
Role of Us	er	Rol	e of Module	Budget		Type of Budget	
☐ Entry	☐ Budget Preparat			ion			
☐ Approve	☐ Budget Executi		dget Execution	า	☐ Develo	opment	
	☐ EFT Transmission			n			
Supervisor Name							
Title/Designation							
Cell Phone No.				Supervisor's			
Email Address	Signature & Seal						
	To be Forw	arded by Bud	lget Branch	, Line Min	istry/Divis	sion	
Officer's Name				Rank/Designation			
Section/ Branch				LM/D Officer's			
Ministry/ Division				Signature & Seal			
ī	o be Approv	ved by Budge	t Desk Offic	er, Financ	e Divisio	n (FD)	
BDO Name				Signatur	e & Seal		
Section/ Branch				FD Supervisor (BDO)			
To b	e Created by	/ iBAS++ Sup	port Team/	FSMU, Fir	ance Divi	ision (FD)	
Allotted User Login Id							
Created By (on behalf of FSMU)				Date of Creation			
Approved by				To be Verified by	,		

- NB. (1) Minimum two users (Entry & Approving) are required for each outlet.
 - (2) For any queries please contact PEMSP Helpdesk: Tel. 8391131-32, at 25, Segunbagicha (2nd Floor, UCEP Cheyne Tower), Dhaka.

USE OF THIS FORM

The purpose of this form is to register all users that require access to Integrated Budget and Accounting System (iBAS++). All users who need to use iBAS++, including the budget preparation, accounting of budget execution, must complete this form.

The information submitted will be used to build an accurate account of all those officers and staff accessing iBAS++ as to maintain system security.

No user will be granted access without having completed the information required overleaf, and having had their application approved heir controlling authority.

CONDITIONS UNDER WHICH APPLICATION IS APPLIED FOR AND IS GRANTED

I (the applicant named overleaf) declare that the information given is correct and I agree to comply with all requirements or any other reasonable conditions that may be imposed by the competent authority in respect of iBAS++ access.

I (the applicant named overleaf) acknowledge that all information of system is confidential and unauthorized disclosure, falsifying, damaging or any misuse is an offence.

nature :
nature :

If approved, as an authorized user of iBAS++ you agree to:

- Keep secure and not disclose to another person the unique user identifier (User Id) and Password allocated to you.
- Only use the user Id/Password to access or otherwise receive data that does not pertain to your role/designation.
- Notify the system admin if you gain access or otherwise receive data that does not pertain to your role/designation.
- Notify the system admin if you suspect that the security of your User Id/Password is in any way compromised.
- Not copy or distribute system data or applications to any person, machine or media, unless otherwise authorized.
- Notify the system admin, if you:
 - Change your current post
 - Change the address or location of your normal place of connection
 - o Change any other information submitted overleaf