

Requesting Covid19 Safety and Cleaning Supplies through **FAMIS Self Services** Portal

7/23/2020 Rev.

1) In any web browser, navigate to FAMIS Self Services and login with your NetId and password. www.uvm.edu/famis

2) Click on **Service Requests** button

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Self Services | SPACE SURVEY | FAMIS Menu

Select a Site

FAHC	UNIVERSITY OF VERMONT MEDICAL CENTE
FORT	FORT SITE
JERICHO	JERICHO SITE
MAIN	UNIVERSITY OF VERMONT - MAIN
OTHER	OTHER SITES
UNDERHILL	UNDERHILL SITE
WEYBRIDGE	WEYBRIDGE SITE

3) Click on **Create Service Request** button

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Display Service Requests

Search

Search [Advanced Search](#)

Results

Request Number	Phase	Work Order	Request Description	Status	Conv	Project	Requestor	Alt Requestor	Maint Type	Site	Building	Date Entered

4) Confirm your **Requestor** information is correct and click **Next** button.

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Self Services SPACE SURVEY FAMIS Menu

Create Service Request: Confirm Requestor - Step 1 of 5

Confirm Requestor Select Service Enter Service Details Enter Location Review

Requestor

Requestor PEARY, STEVEN
Phone 8026561077 Payer
Cell Phone E-mail speary@uvm.edu
Department 11700 Mail Code

Alternate Requestor

Name Phone

Cancel **Next**

5) Under **Available Services**, click the **COVID-19 SERVICES (ONLY USED BY SAFETY COORDINATOR/OFFICER)** link.

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Self Services SPACE SURVEY FAMIS Menu

Create Service Request: Select Service - Step 2 of 5

Confirm Requestor Select Service Enter Service Details Enter Location Review

Available Services

- COVID-19 SERVICES (ONLY USED BY SAFETY COORDINATOR/OFFICER)
- FREQUENTLY REQUESTED SERVICES
- New Web Request "Create your own request"

Cancel Back

6) Then, click on **PPE AND SUPPLIES** link and then click on **REQUEST PPE AND SUPPLIES** link.

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Create Service Request: Select Service - Step 2 of 5

Confirm Requestor Select Service Enter Service Details Enter Location Review

Services within COVID-19 SERVICES (ONLY USED BY SAFETY COORDINATOR/OFFICER)

- PHYSICAL BARRIERS
- PPE AND SUPPLIES
- New Web Request "Create your own request"

Cancel Back

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Self Services SPACE SURVEY FAMIS Menu

Create Service Request: Select Service - Step 2 of 5

Confirm Requestor Select Service Enter Service Details Enter Location Review

Services within: COVID-19 SERVICES (ONLY USED BY SAFETY COORDINATOR/OFFICER) - PPE AND SUPPLIES

- REQUEST PPE AND SUPPLIES
- New Web Request "Create your own request"

Cancel Back

- 7) The **Account and Work Description** screen contains a validated chart of **Accounts** and a pre-typed listing of supplies in the **Description of Work** text box.

In the Account segments boxes, construct your chart string, be sure to use 2020 in the purpose code to ensure this is tracked as a COVID-19 related expense.

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Create Service Request: Enter Service Details - Step 3 of 5

Confirm Requestor Select Service Enter Service Details Enter Location Review

Account

Chart of Accounts*	Acct Segment 2*	Acct Segment 3*	Acct Segment 4*	Acct Segment 5	Acct Segment 6*	Attribute 1*	Attribute 2*	Pct
Chart of Accounts*	Acct Segment 2*	Acct Segment 3*	Acct Segment 4*	Acct Segment 5	Acct Segment 6*	Attribute 1*	Attribute 2*	Pct
Chart of Accounts*	Acct Segment 2*	Acct Segment 3*	Acct Segment 4*	Acct Segment 5	Acct Segment 6*	Attribute 1*	Attribute 2*	Pct

Work Description

Work Title: FULFILL THE FOLLOWING COVID-19 PPE AND SUPPLIES REQUE

REPLACE # WITH QTY FOR EACH OF THE ITEMS YOU ARE REQUESTING.

Description of Work: FACE
[#] 100727 GLASSES, SAFETY: CLEAR LENS
[#] 111044 GLASSES, SAFETY: CLEAR LENS, OTG (FITS OVER)

To preserve the text formatting, please hit "Enter" after each line. (Limit 3000 chars)

Earliest Start Date: mm/dd/yyyy

Latest Completion Date: mm/dd/yyyy

Dates/Times Work Cannot be Done in Location: e.g. Mon & Fri 8am - 10am

Cancel Back Next

In the Work Description text box, replace the # symbol with the number (quantity) of each item you're requesting. (Leave the date fields blank).

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Self Services SPACE SURVEY FAMIS Menu

Create Service Request: Enter Service Details - Step 3 of 5

Confirm Requestor Select Service Enter Service Details Enter Location Review

Account

Chart of Accounts*	OU-Department*	Fund-Source*	Function*	BU-Proj ID-Proj Act	Program*	Purpose*	Property*	Pct
STANDARD	01~11701	100~100001	601		0000	2020	0000	
Chart of Accounts*	Acct Segment 2*	Acct Segment 3*	Acct Segment 4*	Acct Segment 5	Acct Segment 6*	Attribute 1*	Attribute 2*	Pct
Chart of Accounts*	Acct Segment 2*	Acct Segment 3*	Acct Segment 4*	Acct Segment 5	Acct Segment 6*	Attribute 1*	Attribute 2*	Pct

Work Description

Work Title: FULFILL THE FOLLOWING COVID-19 PPE AND SUPPLIES REQUE

REPLACE # WITH QTY FOR EACH OF THE ITEMS YOU ARE REQUESTING.

Description of Work: FACE
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[#] 111044 GLASSES, SAFETY: CLEAR LENS, OTG (FITS OVER)

To preserve the text formatting, please hit "Enter" after each line. (Limit 3000 chars)

Earliest Start Date: mm/dd/yyyy

Latest Completion Date: mm/dd/yyyy

Dates/Times Work Cannot be Done in Location: e.g. Mon & Fri 8am - 10am

Cancel Back Next

8) After typing in your requested quantities, click **Next** button

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Welcome: SPCADY

Self Services **SPACE SURVEY** FAMIS Menu

Create Service Request: Enter Service Details - Step 3 of 5

Confirm Requestor Select Service **Enter Service Details** Enter Location Review

Account

Chart of Accounts*	OU-Department*	Fund-Source*	Function*	BU-Proj. ID-Proj. Act	Program*	Purpose*	Property*	Pct
STANDARD	01~11701	100~100001	601		0000	2020	0000	
Chart of Accounts*	Acct Segment 2*	Acct Segment 3*	Acct Segment 4*	Acct Segment 5	Acct Segment 6*	Attribute 1*	Attribute 2*	Pct
Chart of Accounts*	Acct Segment 2*	Acct Segment 3*	Acct Segment 4*	Acct Segment 5	Acct Segment 6*	Attribute 1*	Attribute 2*	Pct

Work Description

Work Title: FULFILL THE FOLLOWING COVID-19 PPE AND SUPPLIES REQUE

Description of Work: REPLACE # WITH QTY FOR EACH OF THE ITEMS YOU ARE REQUESTING.
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[1] 100727 GLASSES, SAFETY: CLEAR LENS
[#] 111044 GLASSES, SAFETY: CLEAR LENS, OTG (FIIS OVER)

To preserve the text formatting, please hit "Enter" after each line. (Limit 3000 chars)

Earliest Start Date: mm/dd/yyyy

Latest Completion Date: mm/dd/yyyy

Dates/Times Work Cannot be Done in Location: e.g. Mon & Fri 8am - 10am

Cancel Back **Next**

9) Indicate where you want the supplies delivered by clicking on and drilling down through **Site** then **Building** then **Floor** then **Room**.

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Self Services **SPACE SURVEY - FAMIS Menu**

Create Service Request: Enter Location - Step 4 of 5

Confirm Requestor Select Service Enter Service Details **Enter Location** Review

Site * Building

Floor Room

Cancel Back Next

10) Click the **Next** button

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Self Services **SPACE SURVEY - FAMIS Menu**

Create Service Request: Enter Location - Step 4 of 5

Confirm Requestor Select Service Enter Service Details **Enter Location** Review

Site * Building

Floor Room

Cancel Back **Next**

11) Review your submission details and click **Finish** to submit your request.

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Self Services SPACE SURVEY FAMIS Menu

Create Service Request: Review - Step 5 of 5

Confirm Requestor Select Service Enter Service Details Enter Location **Review**

Requestor Information

Requestor Name PEARY, STEVEN Requestor Phone 8026561077
Requestor Dept 11700 Requestor Email speary@uvm.edu
Alt Requester Name Alt Requestor Phone

Service Description

Earliest Start Date Latest Completion Date
Blackout Dates and Times Work Title PLEASE DELIVER THE FOLLOWING COVID-19 SUPPLIES
Description REPLACE # WITH QTY FOR EACH OF THE ITEMS YOU ARE REQUESTING.
[1] GLASSES, SAFETY: CLEAR LENS, EA (100727)
[#] GOGGLES, FLEXIBLE: VENTED, EA (100734)
[#] FACE SHIELD, ADJUSTABLE: W/HEADGEAR, EA (110405)
[#] MASK, RESPIRATOR: PARTICULATE, P100, EA (101624)
[#] GLOVES, DISPOSABLE: POWDER-FREE NITRILE, 100/BOX, MED, BOX (110047)
[#] GLOVES, DISPOSABLE: POWDER-FREE NITRILE, 100/BOX, LG, BOX (802734)
[#] GLOVES, DISPOSABLE: POWDER-FREE NITRILE, 100/BOX, XL, BOX (802733)

Location

Site main UNIVERSITY OF VERMONT - MAIN
Building
Floor
Room

Cancel Finish

12) The system will assign an **SR** number and submittal date. **You are done.**

13) If you wish to create another Service Request (for supplies or for maintenance) then click **Go Back to Service Requests** to return to main menu.

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Self Services SPACE SURVEY FAMIS Menu

Create Service Request

Your Facilities Work Request (SR379682) was submitted on 06/10/2020.

Requestor Information

Requestor Name PEARY, STEVEN Requestor Phone 8026561077
Requestor Dept 11700 Requestor Email speary@uvm.edu
Alt Requester Name Alt Requestor Phone

Service Description

Earliest Start Date Latest Completion Date
Blackout Dates and Times Work Title PLEASE DELIVER THE FOLLOWING COVID-19 SUPPLIES
Description REPLACE # WITH QTY FOR EACH OF THE ITEMS YOU ARE REQUESTING.
[1] GLASSES, SAFETY: CLEAR LENS, EA (100727)
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Location

Site main UNIVERSITY OF VERMONT - MAIN
Building
Floor
Room

Attach Files Go Back to Service Requests