

# User Access Review & Audit Report

## General Information

System Name	
Date of Review	
Reviewer(s)	
Department/Unit	
Reporting Period	

## Purpose & Scope

## User Access List

User Name	Role/Access Level	Department	Date Granted	Owner/Manager	Status	Remarks

\*Status: Active/Inactive/To be removed/Changed

## Findings & Issues

Description of Issue	Users Affected	Risk Level	Recommendation	Status

## Review Actions Taken

- 
- 

## Conclusion & Next Steps

Reviewer Signature

Date: \_\_\_\_\_

Manager Approval

Date: \_\_\_\_\_