

Rights to Data *(New/Changed Database Users)*

Complete Section A and/or Section B

Section A – for replacement or identical rights

Department _____	Employee _____	Extension _____	Date _____
Employee Replaces _____	Employee to have same rights as _____		

Section B – for “New” or additional rights

Records	Information			Access Type	
Department	Demographic	Financial	Academic	Read Only	Update
<i>Admission</i>					
<i>Alumni</i>					
<i>Bus – A/R</i>					
<i>Bus – A/P</i>					
<i>Bus – G/L</i>					
<i>Development</i>					
<i>Financial Aid</i>					
<i>Employee</i>					
<i>Housing</i>					
<i>Registrar</i>					
<i>Vendor</i>					

Any other specific information (please describe)

I understand that this information may be of a sensitive nature and that strict confidentiality must be maintained. I further understand that the violation of his understanding may result in disciplinary action.

(Print Employee Name) *(Employee Signature)* *(Date)*

(Print Supervisor Name) *(Supervisor Signature)* *(Date)*

(Print Custodian Name) *(Custodian Signature)* *(Date)*

For IT use only:	
Access granted by: _____	_____
	<i>(IT Staff Member Signature)</i> <i>(Date)</i>
Notes: _____	