

myGate/Banner Access Request Form for Student-Related Information

Fax to: 809-3050

Registrar's Office

Contact Tracy Roberts at 809-4184 if you have any questions.

Date ____/____/____ Name _____ M _____
Last First

Department _____ Position/Title _____

MSU Email _____@_____murraystate.edu MSU Phone _____

I am Replacing Employee _____
(if applicable) Last First

CHECK ALL THAT APPLY

- I have attended MSU FERPA training with a Registrar's Office representative. [This is required to receive access.]
- I am a current employee **changing from** _____ **Department**. Because of this change, I need different Student-Related Info access as described below.
- I have **changed positions** in this department and need different Student-Related Info access as described below.
- I am a **new employee** (or current employee without access) to MSU and need Student-Related Info access as described below.

IMPORTANT— READ BEFORE SIGNING

I accept responsibility for complying with state and federal laws and University policies that relate to information technology and confidentiality. The privilege of access to any of the University's computer systems may be withdrawn as deemed appropriate by the supervisor of each system.

I verify that I have read and accept the "Accessing Student Data User Agreement" on page 2.

User's Signature _____

Date ____/____/____

Supervisor

Specific Student-Related Types of Info Needed & Why (i.e. addresses, phone #s, etc.)

- Please grant Student-Related Info access to this employee. I will notify the Registrar's Office if this employee leaves this department OR changes positions and requires different (or no) access.
- Please remove access for this former employee who no longer works at MSU.
- Please remove the existing Student-Related Info access for this former employee who may be employed in another department at MSU and may request appropriate access through the new department if necessary.

 Supervisor Name (please print)

 Supervisor Signature

____/____/____
 Date

Registrar's Office Use Only

INB Security Class _____

Copied to Bursar ____/____/____ Copied to Adm ____/____/____

Requested from IS ____/____/____ Processed ____/____/____

Notified user ____/____/____ Access Removed ____/____/____

Accessing Student Data User Agreement

I verify by my signature on the “Student-Related Info Access Request Form” that I will comply with FERPA training regarding the proper use of student data.

In addition, my signature verifies that I will comply with all University policies and procedures as they relate to accessing or releasing student data, which include but are not limited to the following:

1. Using my Student-Related Info access in a responsible manner by
 - a) Never leaving an unattended computer signed on.
 - b) Neither giving my personal signon to another individual, nor allowing an unauthorized individual to access a system after I have signed on.
 - c) Neither posting nor recording my signon in a location known or readily available to others.
2. Using the information available to me strictly for purposes related to the University tasks assigned to me.
3. Never releasing student information available to me to any other party, and referring any requests for student information to the Registrar’s Office. This includes requests from University employees or students and non-University persons, businesses, or organizations.
4. Securing and limiting access to any extracted data or hard copy requests that contain sensitive or confidential student data, shredding such documents when they are no longer needed.
5. Requiring identification with a photograph before releasing any confidential information about a student to said student.
6. Training or requesting training for all employees that answer to me (including student workers) who in any way have access to confidential student information. Periodic refresher training is also recommended.