

**Applicant Section**

I understand that the access being granted through my administrative office staff account is assigned to me at the request of the Department Head. It is to be used only in connection with my assigned duties as a vendor, consultant, or otherwise an employee of UTEP and may be revoked without notice upon the request of the administrator. I understand and accept the following terms and conditions:

- I agree not to reveal my password nor allow anyone to use the account assigned to me. I am responsible for any changes made under my credentials.
- I agree to abide by the Payment Card Industry Data Security Standard (PCI DSS), as well as The University of Texas at El Paso PCI DSS Policy, and the Acceptable Use Agreement.
- I agree to maintain the security of customer information, including payment cardholder information such as payment card number, payment cardholder name, expiration date, and payment cardholder verification number. I agree to refer *all outside requests* for cardholder information to the Information Security Office.
- I agree to maintain the confidentiality of any and all data that I retrieve in the course of my duties, including data that I use for reporting purposes or in other software products.
- I agree that it is my responsibility to prevent unauthorized access and disclosure of the data within my possession.
- Access to administrative data will be determined by the requirements of my vendor agreement, and therefore I am only authorized to retrieve this data on a "need to know" basis.
- I agree to comply with all UTEP policies including but not limited to Information Security policies, University of Texas System policies, computer access standards, confidentiality of data standards, data entry standards, and data integrity standards.

I am aware that any violation of these policies or standards may lead to the immediate suspension of my computer privileges. I understand that unauthorized release of sensitive or restricted information is a breach of data security and may be cause for disciplinary action, up to and including termination of agreement, and may be subject to or include civil and criminal prosecution.

**Applicant Information:**

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

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Job Title: \_\_\_\_\_ Company: \_\_\_\_\_

Phone: \_\_\_\_\_ Bldg/Room: \_\_\_\_\_

Address: \_\_\_\_\_

Job Function or Special Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Department Head:** I authorize a user id or the changes listed for the above person. I understand that it is my responsibility to make appropriate changes when there is a change in the applicant's status.

**Dept. Head Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Dept. Head Name**  
**(Please Print):** \_\_\_\_\_

Please Fax this form to (915) 747-6101 or E-Mail to [security@utep.edu](mailto:security@utep.edu)

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

Chief Information Security Officer