



The University of Texas at El Paso

Information Technology

Application for Datamart Access

Applicant Section

I understand that this administrative office staff account is assigned to me at the request of the Department Head to be used only in connection with my assigned duties as an employee of UTEP and may be revoked without notice upon the request of this administrator. I understand and accept the following terms and conditions:

- I am aware that passwords are the first line of security on BIS, Goldmine/Banner, or Datamart. I agree not to reveal my password nor allow anyone to use the account assigned to me. I am responsible for any changes made to the database under my user name.
- I agree to abide by the Family Education Rights and Privacy Act of 1974 (FERPA) regulations. Under this act, information about current and former UTEP students is legally designated as private. I agree to refer *all outside requests* for student information to the Office of the Registrar, unless I have been authorized by the Registrar to release predesignated information. (<http://www.ed.gov/offices/OM/fpco/ferpa/>)
- I must maintain the confidentiality of any and all data that I retrieve from BIS, Goldmine/Banner, or Datamart in the course of my job duties, including data that I use for reporting purposes or in other software products.
- Access to administrative data will be determined by the requirements of my job, and therefore I am only authorized to retrieve this data on a "need to know" basis.
- I agree to comply with all UTEP policies on security, computer access, and confidentiality of data, data entry standards, and data integrity.

I am aware that any violation of these policies 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, which could include dismissal.

Signature: _____	Date: _____
Applicant's Name: _____	UTEP ID: _____
Job Title: _____	Extension: _____
Dept.: _____	Bldg/Room: _____
Student <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/>	* Email Address: _____

Data Type Requested *select all that apply:*

- Student w/SSN
 Student w/o SSN
 Employee w/SSN
 Employee w/o SSN
 Employee Payroll

Reason for Access Request: _____

If Social Security Number access is required, state reason for need: _____

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

Dept. Head Signature: _____ **Date:** _____

Dept. Head Name (Please Print): _____

*Fax completed form to 747-6484

For IT use only:

Request Number: _____

* Contact the Helpdesk at 5257 if you wish to obtain an email address