NORTHWESTERN UNIVERSITY - SES ACCESS REQUEST

Financial Aid - QUERY ACCESS

Please scan/email signed form to m-powell@northwestern.edu (Or fax to 847/491-5969, Attn: Michele Powell)

1. Applicant/Current SES User * required									
*Last Name		*First Name		M.I.	*EmplID	*NetID			
*Position		*Campus *Work phone		one	*Email Address	@northwestern.edu			
*Department(s)						Name of individual previously			
2. Supe	rvisor				3. *Request Type				
*Last Name		*First Name		M.I.	New SES User Current SES User: SES Admin ID is				
*Supervi	isor Ne	tID:	*Supervisor work phone:		I am a current user who is changing departments.				
						•			
4.	Levels	of access and intende	ed use of data – Plea	se reply to	all four q	uestions:			
Yes	No				•				
	П	*I am requesting read-	only access to data (I w	ill only be ru	nning que	ries written by others).			
		*I am requesting read-only access to data (I will only be running queries written by others). *I am requesting the ability to write queries and run queries written by others.							
		 Note: training or previous query writing experience required for this level of access. *This data will be used to populate other systems or applications. 							
						(s) the data will populate.			
		*This data will be used to generate and distribute reports/data/information to other users. - If "Yes", please explain below how data will be distributed.							
5. Ple	ase nr	ovide here any additio	nal information requi	ested above	e and/or	any specific queries or tables	vou are requesting		
3. THE	use pri	Svide Here any addition	nai imormation requi	cstca abovi	c, ana, or	any specific queries or tubies	you are requesting.		

Office Use Only	Access Complete By/Date:	User Notified by SES Date:	(optional) Training Complete Date:
Roles:	Databases:	Comments:	

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6. Data security policy and statement of agreement

The purpose of the Student Enterprise System (SES) is to support the functions required to fulfill job responsibilities in regard to student admission, student records and registration, student accounts and student financial aid. The privacy and confidentiality of student data is protected by The Family Educational Rights and Privacy Act[†] (FERPA).

Statement of Agreement

Data Security

Please mark the box to the left of each statement to indicate that you have read the statement.

		I have completed the FERPA† Online Training, available via the following link: http://www.northwestern.edu/hr/workplace-learning/ferpa.html						
		I will only access SES while performing job responsibil accordance with federal, University and departmenta record information to any unauthorized third party.		•				
		I will not seek personal benefit or knowingly permit of SES.	thers to benefit personally from information o	ontained in				
		I will not knowingly include or cause to be included in	any record or report a false, inaccurate, or m	isleading entry.				
		I will not divulge passwords or sign-on credentials to a	inyone.					
	Wo	rkstation Security						
		I will not download from SES any non-public student is or other data protected by FERPA†—to my computer For personal computers, faculty/staff can buy encryptinformation on data encryption solutions, see the foll http://www.it.northwestern.edu/policies/dataencryptic	(University or personal) unless that computer ion software licenses at a minimal cost. For mowing site:	is encrypted.				
		I agree to use and maintain commercially available so and (b) an active firewall on any computer I use to acc Northwestern University via http://www.it.northwestern	cess SES. I understand that (a) is available for t					
		I understand that using Virtual Private Network (VPN) For more information see http://www.it.northweste		om off-campus.				
		□ I agree that no remote desktop software shall be enabled on any computer I use to access SES. (Examples include but are not limited to, the following: Go To My PC, PC Anywhere, Log Me In.) The only approved exception is remote desktop software required and installed by a Northwestern department.						
	t_F	ERPA policy: http://www.registrar.northwestern.edu	u/academic records/FERPA policy.html					
		SIGNING BELOW, I AGREE TO ALL STATEMENTS ABOV LY BE CAUSE FOR APPROPRIATE DISCIPLINARY ACTION		THIS AGREEMENT				
	*A	pplicant's signature:	(sign)	(date)				
7.	*Sup	pervisor approval:	(sign)	(date)				
	•	Supervisor: Please check this box if you do NOT a	uthorize this user for off-campus access					
8.	Data	Custodian:	(signature)	(date)				