



MISSISSIPPI STATE UNIVERSITY™
INFORMATION TECHNOLOGY SERVICES
BANNER ACCESS REQUEST FORM

Return both pages of this form to the ITS Service Desk - 108 ALLEN HALL

USER INFORMATION

Name: _____

Department: _____ Phone: _____

MSU ID Number: _____ NetID: _____

Access Effective Date: _____ Access Expiration Date (to revoke access): _____

Are you a current user of the system? Yes No

*The individual requesting BANNER access must read and sign the second page of this form.
 If you have questions, please contact the ITS Service Desk at 662-325-0631 or email servicedesk@msstate.edu.*

CLASS

List class or profile name and specify access option: **(G) Grant Access, (R) Revoke Access.**

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Approval access requests requires an Approval Queue Request Form

ADDITIONAL FORMS OR PROCESSES (not included in classes)

List form or process name with type of access needed: **(Q) Query, (M) Update/Query, (R) Revoke access.**

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

ORGANIZATION

List ORG code(s) for access and specify access option: **(G) Grant Access, (R) Revoke Access.**

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

FOR INTERNAL USE ONLY

Form Level Security Added By: _____ Date _____

System: _____

**MISSISSIPPI STATE UNIVERSITY
CODE OF RESPONSIBILITY FOR SECURITY AND
CONFIDENTIALITY OF RECORDS, FILES, AND DATABASES**

Security and confidentiality are matters of concern to all Mississippi State University faculty, staff, and students who have access to university records and data, and collectively these individuals are responsible for the accuracy, integrity and confidentiality of the information to which they have access. Since conduct, either on or off the job, could affect or threaten the security and confidentiality of this information, each individual having access to University records is expected to abide by the following:

- No one may make or permit unauthorized use of any information in files maintained, stored, controlled, or processed by the University.
- No one is permitted to seek personal benefit, allow others to benefit personally or to divulge, in any way, knowledge of any confidential information which has come to them by virtue of their work assignment.
- No one is to exhibit or divulge the contents of any record or report to any person except in the conduct of their work assignment and in accordance with Mississippi State University policies and procedures.
- No one may knowingly include, or cause to be included, in any record or report, a false, inaccurate, or misleading entry. No one may knowingly change or delete or cause to be changed or deleted an entry in any record or report, unless in accordance with Mississippi State University policies and procedures.
- No official record or report, or copy thereof, may be removed from the office where it is maintained or copied or printed via electronic means except in the performance of a person's duties, and in accordance with established procedures.
- No one is to aid, abet, or act in conspiracy with another to violate any part of this code.
- Each person is responsible for their assigned NetID and NetPassword, and they are not to be shared with anyone else.
- No one shall use another person's NetID and NetPassword.
- Any knowledge of a violation of this code must immediately be reported to the individual's supervisor.
- Each person shall abide by state and federal laws and regulations, as well as policies of the Board of Trustees of State Institutions of Higher Learning and University policies including, but not limited to, OP 01.10 Information Security Policy, OP 01.23 Social Security Number Usage, AOP 10.06 Family Education Rights and Privacy Act, HRM 60-109 Records Management and Security, and OP 62.08 Credit/Debit Card Processing.

USER AFFIDAVIT:

I have read, do understand, and will comply with Mississippi State University's Code of Responsibility for Security and Confidentiality of Records, Files, and Databases.

I am also aware of my responsibilities to protect the confidentiality of information regarding faculty, staff, and students and agree to use information from this system for carrying out official duties and responsibilities of my position with Mississippi State University ONLY .

I understand that violation of this code may lead to disciplinary action consistent with Mississippi State University policies and procedures.

Employee Signature: _____ **Date** _____

Approval

Print Name: _____

Signature: _____ **Date** _____

Please return to the ITS Service Desk - 108 ALLEN HALL and retain a copy for your records.