



CAMPUS SOLUTIONS ACCESS REQUEST FORM

Student Administration Module

Admission, Student Records, Campus Community, Financial Aid, Academic Advisement, Student Financials

1. USER INFORMATION:

Last Name: First: M.I.: Employee ID #: Job Title: Effective Date: Email: Extension: Dept. Name: Dept. ID #:

2. EMPLOYEE STATUS:

Permanent Student Worker Temporary Affiliate Auxiliary

3. INFO. SECURITY TRAINING STATUS:

Status: Completion Date:

4. SELECT A MODULE: One form per module. Route the completed and signed form to the appropriate Gatekeeper below:

Admissions Campus Community Financial Aid Student Financials Student Records Academic Advisement

5. DESCRIPTION OF ACCESS REQUESTED TO BE ADDED OR REMOVED:

6. USER TO CLONE: Row Level Security would be applied using this information.

Last Name: First: Employee ID #:

7. SIGNATURE/APPROVALS:

Applicant's Supervisor, Division/College Administrator: My signature certifies that the named employee requires access to data within CS to perform their job duties. I understand that it is my obligation to ensure that adequate training is provided to the employee in compliance with State and Federal laws and University policies governing access to information contained in employee, applicant and student records.

Applicant's Signature: Signature: Date:

Applicant's Supervisor: Print: Signature: Date: Extension: Email: @sfsu.edu

Registration Coordinator: Print: Signature: Date:

Module Gatekeeper: Print: Signature: Date: Extension: Email: @sfsu.edu

Account Administrator: Print: Signature: Date:



## CAMPUS SOLUTIONS ACCESS REQUEST FORM - STUDENT ADMIN INSTRUCTIONS

**PURPOSE:** The Campus Solutions Account and Access Authorization form is to be filled by all members of Campus Solution implementation team to request access to CS project resources. See [Administrative Account Access Control Policy](http://tech.sfsu.edu/policy/administrativeaccountaccesscontrolpolicy) (<http://tech.sfsu.edu/policy/administrativeaccountaccesscontrolpolicy>), and [Policy for server security](http://tech.sfsu.edu/policy/serversecurity) (<http://tech.sfsu.edu/policy/serversecurity>).

**NOTE:** Submit this form when you have a new person who will require systems access for CS resources. Submit a fully completed form to avoid delays in account creation. In case you have any questions, please contact the appropriate gatekeeper for the requested module located on the [Campus Solutions Gatekeepers list](#)

By signing this form, the user agrees to have read, understood and to abide by the campus [Acceptable Use Policy](http://tech.sfsu.edu/policy/acceptableusepolicy) (<http://tech.sfsu.edu/policy/acceptableusepolicy>) and [Network Policy](http://tech.sfsu.edu/policy/networkpolicy) (<http://tech.sfsu.edu/policy/networkpolicy>) and other policies as listed

**INSTRUCTIONS:** Use this form to request access for CAMPUS SOLUTIONS Student Administration modules. Complete ONE form for each employee/module. If an employee is leaving and a new employee is hired, two forms must be completed. One form to remove all access for the employee leaving and another form for the new employee requesting new access to the specified module.

The Campus Solutions Security Team strives to fill all requests as soon as possible. However, to ensure the requested security is in place by the date needed, please submit your security request six (6) business days in advance.

### 1. USER INFORMATION:

All fields are mandatory in this section.

### 2. EMPLOYEE STATUS:

Select **ONE** of the employee status that represents your affiliation with the university. **Permanent**, **Temporary** (< 1 year assignment), **Affiliate** (for access to CASHNET), **Auxiliary** (Community member, non employee status) or **Student Worker**.

### 3. INFORMATION SECURITY TRAINING STATUS:

Employee and Student Information Privacy needs to be completed. This will be filled out by the Applicant Supervisor / Registration Coordinator. Training and validation can be conducted in [SkillPort](#).

### 4. MODULES:

Select **ONE** of the following CAMPUS SOLUTIONS SA modules for each employee: 1. *Admissions*; 2. *Campus Community*; 3. *Financial Aid*; 4. *Student Records*; 5. *Student Financials*; 6. *Academic Advisement*.

### 5. DESCRIPTION OF ACCESS REQUESTED TO BE ADDED OR REMOVED:

Specify *ADD* or *REMOVE*, along with a brief description of the requested access within the selected module.

### 6. USER TO CLONE:

If applicable, provide the full name and ID number of another employee in the department that has the same access.

### 7. SIGNATURE/APPROVALS:

This form must be signed by the *Applicant's Supervisor* and *College or Division Administrator* after completion. Send the form to the appropriate Gatekeeper/Module listed in Section 3 on the form.

### 8. TRAINING

The *Applicant's Supervisor / Registration Coordinator* are responsible for ensuring the completion of appropriate training for the requested roles.

### 9. QUESTIONS

If you have questions about the form or need clarification on the roles, please contact the appropriate gatekeeper for the requested module located on the [Campus Solutions Gatekeepers list](#).