

Select

Data Type

Institutional Research

North Carolina Agricultural & Technical State University Internal Fact Book User Account Request Form

Location

1020 East Wendover Avenue, Suite 208

Directions: Complete the form and submit a completed form to each Data Owner that you select.

Data Owner

IR

Requester's Name:	(First)	(Midd	le)	(Last)	
Department:		Building:			
Rm/Floor/Cubicle:		Phone Number: _		Extension:	
NC A&T SU Email Addr	ess:		Banner ID:		
Status (check one):	Employee	Employee – TEMP	Student – TEMP		
If temporary, specify t	he begin date and	end date. Begin Date: _		End Date:	
	C	onfidentiality Security Agre	ement		
confidential unless information is prope that information is prope when authorized. I will not the University network, of standards, and University	med otherwise. I wi rly secured in electr tot perform an illega data, and/or informa y policies and standa	onic, written, and/or printed f	words provided Format and will of that would cause by federal and so visions/its/policy	to me with anyone. I will ensure only disclose the information harm directly or indirectly to tate regulations, industry y/index.html). When my	
Requester's Signature:			Date:		
Supervisor's Name (print):			Email Address:		
Supervisor's Signature:			Date:		

Submission of Form

Please sign/date this form and submit to your supervisor for approval. Once your supervisor has approved your access, please submit via email to ospie@ncat.edu.