INFORMATION RESOURCES REQUEST FORM Lamar State College Orange

Once the account creation process is complete, the Information Services Department will notify your Supervisor via e-mail, and your credentials will be placed in the mailroom in the Academic Center. Passwords will not be given out via e-mail or telephone. The applicant agrees not to improperly use the software or data in any way. Violation of this policy may result in the termination of this account, as well as termination of employment.

USER INFORMATION (PLEASE PRINT CLEARLY) Last Name: _______MI: ______MI: _____ Department: ______Title: _____ Office Number: _____Campus Phone Extension: _____Date Requested: _____ **EMPLOYMENT STATUS (CHECK ALL THAT APPLY)** ☐ STUDENT ☐ FACULTY ☐ STAFF ☐ CONSULTANT ☐ RETIREE ☐ FULL TIME ☐ PART TIME **REQUESTED RESOURCES** ☐ EMAIL ☐ VOICEMAIL ONLY ☐ TELEPHONE WITH VOICEMAIL □ NETWORK SHARES (list) ☐ DegreeWorks Advisor Access VPSS Signature & Date ☐ Target/Student Announcements in Blackboard News (The ability to post) Vice President Signature & Date ☐ Campus Announcements in Blackboard News (The ability to post) **President** Signature & Date **AUTHORIZATION SIGNATURES** Applicant Signature & Date: _____ Supervisor Signature & Date: I also acknowledge that by accessing Lamar State College Orange information I am governed by the Family Educational Rights and Privacy Act of 1974 (a.k.a., Buckley Amendment, FERPA) of which ensures the confidentiality of student records. Release of Student information without the written consent of the person identified on the document is a violation of Sec 438 Public Law 90-247. I also acknowledge that I have read and I understand that I am governed by the Lamar State College Orange Information Resource Use Policy. **COMPUTER SERVICES / HUMAN RESOURCES ONLY** ASSIGNED NetID (USERNAME): ______DATE PROCESSED: _____ HR ENTERED: ______DATE PROCESSED: _____ BANNER ID#: ______ EMAIL: _____

INFORMATION RESOURCES REQUEST FORM Lamar State College Orange

To the Lamar State College Orange Community:

Through our Administrative System (Student, Finance, and HR Systems), you may now have access to student information that is protected by the Family Education Right and Privacy Act of 1974, as Amended (FERPA) or by institutional policy. FERPA is in effect for any person enrolled in an institution of higher education, regardless of age. FERPA stipulates that certain student information, including but not limited to grades, grade point average, academic probation/suspension and social security number may not be given to a third party without the written consent of the student who "owns" the information. This means you may not post grades by SSN or allow anyone other than the student or an agent of the college who has legitimate need to know to see student information on a monitor or hard copy unless you have written permission from the student. This includes parents. Parents must file a dependent's statement with a photocopy of the page of their Federal Income Tax form listing dependents as proof that the student is their dependent. If you fail to take proper measures to safeguard this information, you will place LSCO at risk and lose your access to the Administrative System. The penalty for FERPA violation is loss of Federal funds including financial aid.

All Lamar State College Orange personnel with access to the Administrative System must acknowledge they understand and accept the responsibility of protecting the privacy of student records. <u>Please sign and date this form, make a copy for your records, and return the original signature copy to the Computer Security Officer</u>. If you have any questions about FERPA, please contact the Records Office.

CONFIDENTIALITY STATEMENT

Other individual must meet the requirements set forth in the law in order to access student information; for example, a parent must sign the FERPA statement and provide proof from Federal Income Tax that the student is a dependent.

If I release information that I should not, or discuss confidential information, I understand that I

- As an employee, I can be dismissed
- As a consumer of LSCO information, my access to said information resources will be removed.

Further legal action may be taken in either case. I have read this form and agree to the requirements of confidentiality.

Name:	Date:
Signature:	Phone#: