

BANNER STUDENT SECURITY ACCESS REQUEST FORM
REGISTRAR

- This form is to be completed by the applicant and supervisor. It has four (4) sections; all information is required.
- Submit the completed form to the Registrar's Office in-person or via email to beattyj@njit.edu.
- The Banner Security Administrator will assign the necessary security classes once a Banner account has been set up and the required approvals have been given.
- You will be informed via e-mail by the Banner Security Administrator once your request has been completed. Contact beattyj@njit.edu for status of request.
- Review Banner training materials.

SECTION 1: Employee Profile (Required)

Last, First Name	Title	Department
Employee Email	UCID	NJIT ID

Do you have access to Self-Service Banner? Yes___No___
Do you have access to Banner 9? Yes___No___

SECTION 2: Complete the following section by indicating the level of security sought for each module. Mark the white spaces with an "x" to select the level of access.

Module	Indicate areas of responsibility	Registrar Use Only (Query / Update)	Registrar Use Only (Approved/Not Approved)	Registrar Use Only (Comments)
Comments (INB)				
DegreeWorks				
Faculty Assignments				
Holds (INB)				
Permits (INB)				
Self-Service Advisor				
Self-Service Faculty Only				

Additional Access Modules

SECTION 3:

STATEMENT OF UNDERSTANDING OF THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT

Employee Signature

I understand that by virtue of my employment with the New Jersey Institute of Technology, I may have access to records which contain individually identifiable information, the disclosure of which is prohibited by the Family Educational Rights and Privacy Act of 1974. I acknowledge that I fully understand that the intentional disclosure by me of this information to any unauthorized person could subject me to criminal and civil penalties imposed by law. I further acknowledge that such willful or unauthorized disclosure also violates NJIT's Data Access policy and could constitute just cause for disciplinary action including termination of my employment regardless of whether criminal or civil penalties are imposed.

X

Date

SECTION 4:

Supervisor/Authorizer's Signature

I authorize employee for the profile listed in the attached document. I understand it is my responsibility to immediately notify Banner Security (UIS) if employee terminates his/her employment or a change in his/her duties requires a security profile adjustment.

X

Date

Printed Name

Email

Title

Signature below will be required by the Banner Security Officer before processing the Access Request Form.

Registrar Office Signature

Date