Student Data Access Request

UW Directories

Instructions:

- *This form will be used to record signatures for authorization for the administrative systems. If you have any questions about the need for this access, please see the person who forwarded you this form. For general information, contact Data Management at reptreq@u.washington.edu*

- *Please read the statements appearing on the front and back of this form. Recognize that the user has agreed to them by forwarding this request to you, and follow the forwarding instructions that pertain below.*

- *When finished, please sign and forward form to Data Management, Box 355850, FAX: 206-685-3660*

- *Except in unusual cases, forms with fewer than three signatures will be rejected. College/Departmental procedures may require more rigorous approvals. Forward a copy of this request to others that you feel should be aware that this access exists.*

Signatures Required for Access:

I certify that I, the requesting user, need this access in order to perform my job. I recognize that all data is protected by the Family Educational Rights and Privacy Act of 1974 and will not be transmitted to third parties without written consent of the student(s) involved. I will not allow other people to use my account and I will keep my password private. See also additional FERPA notifications on reverse.

Requesting User (please print)	UW NetID	Phone	Signature
		Preferred email address	

Contact Person (please print)	UW NetID	Phone	Signature

The contact person assumes the responsibility of notifying Data Management (reptreq@u) and Computing & Communications Information (adminapp@u) immediately if the user leaves the department or his/her job duties no longer require access.

Registrar Use Only (sign to approve account)

Dean/Director/Chair (please print)	UW NetID	Signature

University of Washington Academic Data Management
Office of the Registrar
reptreq@u.washington.edu – http://depts.washington.edu/reptreq
206-543-0734 – FAX 206-685-3660

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University of Washington -- Office of the Data Management
BOX 355850

AUTHORIZATION FOR ACCESS TO EDUCATIONAL RECORDS

Administrative systems contain confidential student information on University students. You are being given access to Administrative systems to provide your department with information pertaining to students associated with your department. Because the system is unable to restrict your access, you must agree to access only those students.

Student education records must be safeguarded according to the Family Educational Rights and Privacy Act (FERPA). Personally identifiable information from a student's education record may not be released to a third party. Directory Information may be released unless the student has restricted access. Directory information is defined as name, address, telephone number, email address, major field of studies, dates of attendance, full- or part-time enrollment status, most recent previous educational institution attended, degrees and awards received, as well as notices of awards or academic honors to home or town newspapers. For athletes, this also includes date of birth, weight and height. Please refer any questions regarding FERPA to the Assistant Registrar for Records in the Office of the Registrar at 206-543-3290.

Computers storing extracted student data must be protected with the same safeguards as the primary student database, and only authorized University employees with a "need-to-know" may have access. Unauthorized access to confidential electronic student records must be prevented.

Please briefly answer the following questions. Attach additional sheets if convenient or required.

(1) Please indicate which UW Directory, or other infrastructure service, the application will use to access student data

☐ Person Directory Service	☐ UW Windows Infrastructure (UWWI)
☐ Groups Directory Service / Courses	☐ Person Registry (Whatami / Data Extract)
☐ Other (explain)	

(2) Please describe the kinds of queries you hope to run. How often do you expect to use the administrative system?

_____

(3) Please provide addresses of hosts where requested data may be stored, or on which the application will run.

_____

(4) Please outline the security steps that you have taken to safeguard this student data once it is in your control. Please address your: (1) domain password complexity rules & password change schedule; (2) OS & application patch management procedures; (3) virus protection; (4) spyware protection; (5) firewall solution; (6) physical security (locked doors, password-protected screen savers); (7) user training on information security, law (FERPA) and UW policy.

(1) Passwords:
(2) Patches:
(3) Virus:
(4) Spyware:
(5) Firewall:
(6) Physical:
(7) Training:
(8) Other:

(5) Please provide the following network details and technology contacts. For Windows platform, please complete:

Domain DNS name and IP of PDC:	Domain Admin name:	Domain Admin UW NetID:

Or, for UNIX or other platform, please complete:

Host DNS name and IP:	Host Admin name:	Host Admin UW NetID:

I certify that the above statements are correct to the best of my knowledge. I further understand the terms described above and have agreed to these conditions.

_____ _____ _____

Requesting user printed name   Signature   Date

_____ _____ _____

Domain/Host Admin printed name   Signature   Date

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