San Francisco State University – Account Receivable Module

ARM USER ACCESS REQUEST FORM

APPLICANT INFORMATION

Name: _____ (Last) _____ (First) Emp ID# (UIN): _____

Job Title: _____ Email: _____

Dept. ID (#): _____ Bld./Rm #: _____ Phone: (___ ___ ___) ___ ___ ___ - ___ ___ ___ ___

Oracle ID*: _____ *If you do not have an Oracle ID, then you will need to request one before ARM access can be assigned.

I certify that I have read and understood the Information Technology Resources Acceptable Use Policy document (located at http://www.sfsu.edu/~itpolicy/aup.html) and I agree to abide by the practices stated therein. I certify that the proposed use of SF State System application/s is justified by the programs of the California State University system. Penal Code Section 502 states that it is a criminal offense to intentionally access, or cause to be accessed, any computer system or application for the purpose of:

1. Maliciously accessing, altering, deleting, damaging, or destroying any computer system/network, or
2. Devising or executing any scheme or artifice to defraud or extort, or
3. Obtaining money, property, or service with false or fraudulent intent, representation, or promise.

I certify that I have been oriented regarding the state and federal laws and University policies that govern access to and use of information contained in employee, applicant, and student records, including information/data that is accessible through oral, written, or electronic means.

I understand that I am being granted access to this information/data based on my agreement to comply with the following terms and conditions:

- I will comply with state/federal laws and University policies that govern access to and use of information contained in employee, applicant, and student records, including information that is accessible through oral, written, or electronic means
- My right to access information is strictly limited to the specific information/data that is relevant and necessary for me to perform my job-related duties
- I am prohibited from accessing information that is not relevant and necessary for me to perform my job-related duties
- I will be a responsible user of information, whether it relates to my own or another's unit
- I will store information that I obtain under secure conditions
- I will maintain the privacy and confidentiality of the information that I obtain
- I will make every reasonable effort to interpret the information I obtain in an accurate and professional manner and will not modify or delete information unless authorized to do so
- I will ensure that the recipient is authorized to receive information and understands his/her responsibilities as a user before sharing information/data with others by any means
- I will sign off the automated system when I am not actively using it
- I will keep my password(s) to myself and will not disclose it (them) to others unless my immediate supervisor authorizes such disclosure in writing
- I will store and secure confidential/sensitive information, data, reports, etc. in a manner that will maintain their confidentiality when I am not actively using it
- I will dispose of confidential/sensitive information/data in a manner that will preserve its confidentiality when I have finished using them

I understand that if I misuse personal information/data/electronic systems that I obtain through my employment, I will be subject to disciplinary action up to and including termination.

- **IMPORTANT:** Please also complete the SF State Employee/Student Information Privacy (ESIP) Training online at https://www.sfsu.edu/online/esip.htm.

_____ Signature of Person Requesting Access _____ Date

_____ Departmental Approval (Signature) _____ Date _____ Departmental Approval's Name (Print)