

AdmissionPros GRADUATE ACCESS REQUEST FORM

(Required to access confidential applicant information)

REQUEST:

ADD* (new user)
 CHANGE (current user)
 DELETE (current user)

NAME: _____
last first m

PID _____

DEPARTMENT _____

ACCESS NEEDED:

VIEW (cannot change data)
 UPDATE (can change data)

MAJOR CODE(S): _____

CB# _____

E-MAIL: _____

PHONE: _____

POSITION:

STAFF
 STUDENT (current year data access)
 OTHER: _____

TITLE: _____

SIS OPERATOR #: _____
(leave blank if do not have SIS access)

YOU ARE REPLACING AN EMPLOYEE, PLEASE PROVIDE THE NAME OF THE EMPLOYEE BEING REPLACED: _____

SYSTEM NEEDED:

GRADUATE
 OTHER: _____

CONFIDENTIALITY STATEMENT: AdmissionPros System Access grants the requestor the ability to view and/or update confidential applicant information. This information is to be accessed only for the purpose of admission consideration and is to be edited only by staff whose principal functions include the update of applicant information. Graduate student assistants will be granted access to only the current year applicants. If granted AdmissionPros access, I agree to guard the privacy of applicants by not sharing information in any manner with individuals who are not responsible for admission, without the written consent of the applicant.

Requestor Signature: _____ **Date** _____

Departmental Approval: _____ **Date:** _____
FACS Coordinator or Chair Signature

PLEASE FAX REQUEST TO: Cheryl Thomas, Director of Graduate Admission, FAX# 919-966-4010

Once form is processed and approved, a username and password will be emailed to the address above.

OFFICE USE ONLY

SIS Access Required: _____ Yes _____ No
SIS Coordinator Approval: _____

TO SIS: _____

Date: _____