

Section I

Please circle which programyou require access to:

Information Technology Software Application Access FormRevised 03-03-16

This form is used by members of the Hartwick College community to request write/modify privileges on College supported software systems. Please complete sections I through IV, and bring this form to the Technology Resource Center, Clark 150. If you have any questions about completing this form, you may call ext. 4357. Please allow 5 days for your access to be created. Please PRINT or TYPE all information. Incomplete forms will be returned.

Connect Daily/Calendar Blackboard Transaction	ction Symphony Security Cameras
Section II	
Full Name:	
	Hartwick ID #: Phone:
Section III	
 Abiding by the Hartwick College Security Cam Abiding by the policies and procedures establis Accessing and using only that information Maintaining the confidentiality of all Community To not change data or content without appears of the provisions of content that is noted to the provisions of our software licentary and structure of the software. Abiding by the provisions of our software licentary and structure of the software. Conserving system resources, that is, being jud I have read this document and the Hartwick College Use to abide by these, and any departmental or other applicated Hartwick College's network. To the best of my knowled 	on which pertains to your job responsibilities ollege information you may access in the course of using the system opropriate reason within the purview of your position responsibilities pertaining to you or your relatives (e.g., spouse, children, parents, grandparents, uses, including maintaining confidentiality about the design, programming code,
	Date:
Section IV The following section should be completed by the superv	visor/department head of the person who is seeking access
Reason for login request or change:	
Date that employee permissions should end:	
Requester (Supervisor/Chair) Name (Print):	

Requester (supervisor/chair) signature:______ Date: _____

For Blackboard Transaction Only:		
Module Access Needed:		
Customer Access Needed:		
For Calendar Only:		
Calendars Needed:		
Resources Needed:		
For Symphony Security Cameras only:		
Camera(s) employee should have access to:		
Campus Safety Director Approval Initials:	Date:	
The following is to be completed by Hartwick College IT:		
User ID Assigned/changed by:	Date:	
User notified by:	Date:	