

**REQUEST FOR ACCESS  
BANNER FINANCIAL AID**

**ACTION REQUESTED**

New (initial request for access)

Change (additional or change of access)

Delete (remove access)

**USER INFORMATION**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Current User ID: \_\_\_\_\_

Department: \_\_\_\_\_

MTU ID: \_\_\_\_\_

Office Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**ACCESS REQUESTED**

Give a general description of access needed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I would like the same access as another user. USERID \_\_\_\_\_

*Note: Please read and sign the reverse side of this form.*

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**FINANCIAL AID USE ONLY**

BANNER user ID: \_\_\_\_\_

Class/Role Assigned:

Date access granted/removed: \_\_\_\_\_

\_\_\_\_\_

Data Custodian signature: \_\_\_\_\_

\_\_\_\_\_

Michigan Technological University, in order to comply with the Privacy Act of 1974, designates the following student information as public or “directory information”:

Student’s name, address, telephone number, email address, hometown, age, college, major field of study, class (freshmen, sophomore, junior, senior), student status, student level (undergrad/graduate), dates of attendance, participation in officially recognized activities and sports, leadership positions at Michigan Tech, weight and height of athletic team member, specific athletic achievements, Michigan Tech job title, degrees and awards received, academic and other honors, previous schools attended and parent/guardian names in conjunction with university awards/recognition.

Disclosure of any other information available on the Banner Financial Aid system is subject to criminal liability as outlined below.

**Applicant Certification**

Access privileges are issued to staff members with the understanding that they will use the information thus obtained only in the conduct of their official duties, and that no information will be disclosed to other persons who do not have a need to know. In addition, access to, and disclosure of, student information is governed by a federal law – the Family Educational Rights and Privacy Act (FERPA). By requesting access to the Banner Financial Aid System, staff members are accepting responsibility for knowing and complying with FERPA.

I certify that I have read the above, and that I agree to comply with the government’s requirements for the protection of any information covered by the Privacy Act.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DEPARTMENT HEAD/MANAGER APPROVAL**

The Financial Aid System applicant’s duties require access to the administrative computer system and data. I understand that it is my responsibility to inform the Data Custodian of any change in this employee’s status which affects BANNER Financial Aid System access (e.g. termination of employment, leave of absence, change of job responsibilities or department).

\_\_\_\_\_  
Department Head/Manager Signature

\_\_\_\_\_  
Date