Data Access Authorization

This form documents the request for and authorization of access to data maintained in electronic systems. There are sections to be filled out by the requesting department, the department granting access and the ISD analyst involved.

This authorization covers only the specific data that is included in the request. Access to departmental data may only be used for the purpose stated in this form.

Requesting Department

Department: _____

Contact: _____

Title: _____ Phone _____

Data to be Accessed:

_____

Purpose of Access: _____

User Name: _____ Date Needed: _____ to _____

Type of Access: Read only _____ Author _____ Modify _____

Department Owning Data

Department: _____

Restrictions on Use: _____

_____

_____

Approved by: _____ Date _____

Title: _____

Custodial Department

Contact: _____

Title: _____ Phone _____