

# Coppin State College PeopleSoft Account Application Form

Today's Date: \_\_\_\_\_ Needed by: \_\_\_\_\_

You are: \_\_\_ Faculty \_\_\_ Staff \_\_\_ Student \_\_\_ Other specify \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Dept/Phone #: \_\_\_\_\_ Bldg/room # \_\_\_\_\_

Check one: \_\_\_ New account \_\_\_ Update existing account ( PS User ID: \_\_\_\_\_)

System: \_\_\_ HRMS \_\_\_ Financials \_\_\_ Student Admin \_\_\_ Contributor Relations

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

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

Job Responsibility: \_\_\_\_\_

**\* Please read and sign the Campus Security Agreement on pg. 2 of this request.**

DESCRIPTION	ROLE	DESCRIPTION	ROLE
Self Service		Student Financials	
T & L Employee			
Admissions		Student Records	
Campus Community			
Contributor Relations			
Financial Aid			
Query Access			

Supervisor/Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**All employees are eligible for HR Self Service and Time Entry Role/Functions. All other types of access "may" need the approval from one or more of the following system owners.**

**HRMS** \_\_\_\_\_ **Financials:** \_\_\_\_\_  
 (Director of HR/ Payroll Manager) (AVP for A&F or Controller or Procurement Director)

**Student Administration:** \_\_\_\_\_  
 (AVP for Enrollment Management)

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I certify that I am fully aware of the appropriate sections of the Annotated Code of Maryland (Attachments B and C), relating to the illegal access and the unauthorized manipulation of data using computer resources and understand the associated punishment for such crimes.

I further certify that I fully understand the policy of the Director's Office prohibiting its users from divulging or making known, without specific authorization, any secrets or confidential information related to security, design, testing, operation, techniques, procedures or any other sensitive matters relating in any way to the College.

In accordance with the policy of the Director's Office, it is understood and agreed that I will not use any of the College's resources for my personal benefit or for the benefit of any person or entity.

It is understood by me that the College will protect against the abuse of the electronic messaging system through routine checking of e-mail for policy compliance. It is further understood that e-mail may be read by an authorized College employee only in the investigation of technical problems. The college will adhere to the Electronic Communication Privacy Act. All e-mail will be kept confidential, to the extent that it does not violate the law, College policy, or threatens someone's safety.

I further agree that the **USERNAME/PASSWORD** issued to me shall not be used by any other individual and shall remain confidential information. I am aware that my **USERNAME/PASSWORD** must be changed periodically and I will periodically do so and upon request by the College. It is further certified that I will promptly and fully disclose to the College's Director, the Director's designee or system administrator, any breach of security.

I further certify that I fully understand and will comply with the following statements:

- The unauthorized copying of any software which is licensed or protected by copyright is theft, and thus unethical.
- Failure to observe software copyrights and/or license agreements may result in disciplinary action by the copyright owner.
- Respect for the intellectual work and property of others had traditionally been essential to the mission of colleges and universities. We do not tolerate plagiarism, and we do not condone the unauthorized copying of software, including programs, applications, data bases, and code.
- All PC software not directly purchased by the College will be scanned by the College's virus scanning software before being installed on any PC or Server. The College must have written proof of this scan by either the system administrator or his/her designee.

It is understood by me that this Certificate is adopted pursuant to the College to effectively carry out administrative responsibilities. I further understand that this Certificate shall continue in force and effect during the period of time I am authorized to utilize the College's computer resources and thereafter and that the violation of any of its provisions may subject me to the criminal provisions embodied in the respective laws.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ By \_\_\_\_\_ Empl ID: \_\_\_\_\_

Witness Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ ITD/.Designee \_\_\_\_\_

If a minor (under 18 yrs), then this certificate must be signed by a legal guardian or parent. The undersigned certifies that the above Certificate and cited sections of the Maryland Law which appear on the attachments hereof have been read by me to the above named Individual.

Parent/Guardian Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ By \_\_\_\_\_

Revised from University of Maryland System Service Center's Certification of Security