



**REQUEST FOR STUDENT WORKER
 ACCOUNT**

Request Date:

Hand Printed Forms Will Not Be Accepted
 Student Worker Network Rights Will Expire at the End of Every Semester & Summer

(Name and Z# of responsible Faculty/Staff member)

Name
First Middle Initial Last

Z# Position Title

Dept: Location: Phone:

Department Head Signature: _____ Phone:

Type Dept Head Name: Title:

(Student Worker Information)

Name
First middle initial last

Student Login Name (Student May Not Change Login Name/Email Address for this semester)

If student worker requires Banner, a separate login with Student's name will be created. It will expire at the end of the semester. If no screens are specified, an account will not be created.

Banner Screen	F/P/R	Type of Access

I understand that the access I am requesting may contain information that is protected by the Family Education Rights and Privacy Act. (FERPA). I also understand that disclosure to unauthorized parties is a violation of FERPA. When accessing the Banner system, I must only access information needed to complete my assigned task. This information may only be communicated to authorized parties in accordance with the provisions of FERPA.

I agree to maintain the confidentiality of my password and to use my access to ORU information for authorized purposes only.

Student
 Signature: _____ Date: _____
 _____ FOR INFORMATION TECHNOLOGY DEPARTMENT USE ONLY _____

Ticket # _____ Dept. Container: _____ Expire Date: _____

Banner User ID: ___ Student Login Name _____ Banner Password: _____
 Completed by IT: _____, _____