

Non-Production Instances - Functional Access

Section 1 - User Information

Name _____ Date _____

School/College/Department _____ Your ePanther ID _____

Campus Building and Room Number _____ Campus Phone _____

Last 4 of SSN _____ OR Birth Month/Day _____

Section 2 - Requested Access

The individual listed above performs the departmental responsibilities related to PAWS and will require the following areas of access:

Area of Responsibility	Functions Performed

Non-Production Instances (check only the instance(s) needed) TEST DEVL DEMO

Section 3 - Read, Print Form and Sign

I acknowledge that:

- PeopleSoft PAWS is a copyrighted product of Oracle Corporation that has been licensed to University of Wisconsin-Milwaukee with certain restrictions as to its use.
- I cannot use the product to process data other than that of University of Wisconsin-Milwaukee
- I cannot make available or disclose the contents of the PeopleSoft product or any portion thereof to parties outside the University of Wisconsin System, nor can I make unauthorized copies of the PeopleSoft product.
- I cannot seek personal benefit or permit others to benefit personally from information contained in PAWS.
- The Family Educational Rights and Privacy Act protect the privacy and confidentiality of student records. I also acknowledge that access to student records is allowed only to UW-Milwaukee staff that has a legitimate educational purpose. I acknowledge that it is impermissible to release student record information to any unauthorized third party.
- I cannot divulge the contents of any record or report to any person except in the conduct of my work assignment and in accordance with University and departmental policies.
- I cannot knowingly include or cause to be included in any record or report a false, inaccurate, or misleading entry.
- I cannot divulge personal ID's or passwords to anyone, regardless of their affiliation with UW-Milwaukee.

I understand that conduct on my part that disregards the above indicated employment expectations might be cause for immediate dismissal or other appropriate disciplinary action.

Applicant's Signature _____ Date _____ Supervisor's Signature _____ Date _____
 Supervisor's ePanther ID _____
 Supervisor's Campus Phone _____

<p>Office Use</p> <p>Functional Data Custodian Signature _____ Date _____</p> <p>Role(s): _____</p>	<p>Date form sent to security _____</p> <p>EmplID _____</p>
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