



ORACLE REPL and or HYPERION/BRIO SECURITY REQUEST FORM

NOTE: On 3/4/2008 the Data Warehouse & Operational Replicated merged into a single ORACLE environment.

Minnesota
STATE COLLEGES
& UNIVERSITIES

Select One: Oracle/Repl Hyperion/Brio

USER INFORMATION:

Employee Name (Please Print): _____

Position: _____ Institution Name: _____

Telephone Number: (_____) _____ - _____ E-mail Address: _____

DATA PRIVACY STATEMENT

I understand that by virtue of my employment with MnSCU, I am authorized to access and use individually identifiable information that is protected by state and federal privacy laws. I acknowledge that I understand that I may be subject to discipline, up to and including termination, for the intentional unauthorized use or disclosure of this information. I further understand that I may be subject to legal action for the intentional misuse of MnSCU records.

Signature of User _____ Date: _____

Check one of the below options.

Create New User Account Change Existing User Account Delete Existing User Account

Roles: H (High Access Grants Permission to Private Data)

Actions: Definition below:

Add = adds the specified right to the user ID. **Delete** = removes the specified right from the user ID.

<u>Module</u>	<u>Oracle Role</u>	<u>Action</u>
Academic Programs	Public	<input type="checkbox"/> Add <input type="checkbox"/> Del
Accountability Dashboards	ST <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Carl Perkins Data	ST <input type="checkbox"/> L <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Career Service	CS <input type="checkbox"/> L	<input type="checkbox"/> Add <input type="checkbox"/> Del
Course Term / Curriculum	CT <input type="checkbox"/> L	<input type="checkbox"/> Add <input type="checkbox"/> Del
Customized Training	CN <input type="checkbox"/> L	<input type="checkbox"/> Add <input type="checkbox"/> Del
Facilities	FC <input type="checkbox"/> L	<input type="checkbox"/> Add <input type="checkbox"/> Del
Finance	AC <input type="checkbox"/> L <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Financial Aid	FA <input type="checkbox"/> L <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
*Human Resources (*see note on page 2)	HR <input type="checkbox"/> L <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Prospect/Applicant	PA <input type="checkbox"/> L	<input type="checkbox"/> Add <input type="checkbox"/> Del
Security (ISRS User Rights)	AC <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Student Data – Private data access	ST <input type="checkbox"/> L <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Student Disabilities – Private data access	SD <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Student Housing	SH <input type="checkbox"/> L <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del
Student Placement	SP <input type="checkbox"/> L	<input type="checkbox"/> Add <input type="checkbox"/> Del
TRIO-Student Support Service	ST <input type="checkbox"/> L <input type="checkbox"/> H	<input type="checkbox"/> Add <input type="checkbox"/> Del

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USER INFORMATION:

Employee Name (Please Print): _____ Date: _____

CAMPUS AUTHORIZATIONS:

By my signature below I verify that the above user has a bona fide business reason for the security profile requested:

User's Immediate Supervisor: _____ Title: _____
(Please Print) (Please Print)

Immediate Supervisor's Signature: _____ Date: _____

Authorized Signature: _____ Date: _____

Authorized Signature: _____ Date: _____

Authorized Signature: _____ Date: _____

*NOTE: For HR Module Only.

By my signature below I verify the above user has a bona fide business reason for the security profile requested, therefore I grant approval:

Campus CHRO: _____ Print Name: _____ Date: _____
(Signature)

OOO HR Approval: _____ Print Name : _____ Date: _____
(Signature)

To request access to additional data elements not included in the HR_L tables, a "Business Reason" statement must be included with this request form. The Business Reason should include descriptions of the campus applications used when accessing HR private data, which private data elements are needed, how the data will be secured, and who will be able to access the private data.

Direct Business Reason statement questions to:

Toni T. Munos
System Director
Office of the Chancellor
Toni.Munos@so.mnscu.edu
Voice # 651-296-7985

FAX To:
Office of the Chancellor
Voice: 651-201-1430
Fax:651-917-4731