

EMPLOYEE INFORMATION (all fields required)

Name: _____ VUNetID (uppercase): _____

Email: _____ Phone Number: _____

FERPA Acknowledgment

I have activated my VUNetID and e-password, and have completed the online Family Educational Rights and Privacy Act [FERPA] tutorial and quiz with score of 80 or higher required for access to the system.

Instructions for the online FERPA tutorial may be found at: <https://registrar.vanderbilt.edu/ferpa/ferpa-tutorial.php>

Job Requirements

Please describe your job responsibilities or reasons for requesting this access: _____

Please state the name or VUNetID of the individual replaced (if none, write "N/A"): _____

If granted access to GAP, I understand that access to the data is restricted to those individuals who have a legitimate business use and a specific need to know information that enables them to perform their job. I agree to utilize Vanderbilt University data for business purposes only. I understand the confidential nature of the data and will not disclose or use it for personal reasons. I further understand that actions performed by GAP users, including searches, viewing of data, and changes to faculty, postdoctoral and predoctoral records are logged for the purposes of maintaining the security of the system, data integrity and security audits.

Employee Signature _____

Date _____

ACCESS TYPE

Type of Access Requested: Add Access Modify Access Delete Access

Select GAP access to add (choose all that apply): Please specify the school(s)/department(s)/Unit(s) in GAP you need access to:

- PSI/WAG Administrator
- Postdoc - Read Only
- Postdoc - (Personal, Mentor, PrevEdu, Prog/Dept, Funding)
- Predoc - Read Only
- Predoc - (Personal, PrevEdu, Prog/Dept, Funding)

SIGNATURES

Approval for faculty should come from the Associate Dean for Graduate Education.

Supervisor Name _____ Supervisor Signature _____ Date _____

Security Trustee:

Security Trustee Name _____ Security Trustee Signature _____ Date _____

School Trustee:

School Trustee Name _____ School Trustee Signature _____ Date _____

School Trustee Name _____ School Trustee Signature _____ Date _____