CUNY Schedule Builder User Access Request Form

This form is required to request access to the Schedule Builder system. This form must be approved by the employee's supervisor. Employees may NOT approve or grant access for themselves. For transfer employees, seperate forms must be completed to terminate access at the original Campus and to establish access at the new Campus.

EMPLOYEE INFORMATION SECTION (Please Print):			
Last Name:		First Name:	MI:
CUNYfirst Empl	ID *:	Job Title:	
Full time Part time ^{**} If you are a student, please specify college: ^{**}			
Business Unit / Campus: De		Dept	Office:
Work Phone: Ext: CUNY email address:			
CONFIDENTIALITY STATEMENT (Must be signed by the Employee): I understand that the data obtained from this system and its related components is considered confidential and NOT to be shared with anyone who is not authorized to receive such data. I understand that I am individually accountable for the use of my User ID in the Schedule Builder system. Improper use of my User ID could lead to revocation of access rights and further disciplinary proceedings in accordance with CUNY policies, CUNY IT Security Procedures (security.cuny.edu), rules and regulations, and applicable collective bargaining agreements. Employee's Signature: Signature Date:			
	n signature: Employees may accept the Confidentiality Sta		ployee Self Service. Go to: Confidentiality
http://home.cunyfirst.cuny.edu, log in and navigate to, Human Capital Management > Self Service > CF Confidentiality Statement Agreement Code:			
Managerial Approval (Requesting Supervisor) :			
Business Unit / Campus:			partment / Office:
Last Name:		Fir	st Name:
Signature:		Da	te:
In the absence of written signature: Please email your approval to the appropriate campus party, per your campus' request process.			
ADD DELE	TE ROLE	DI	SCRIPTION
	CU_VSB_Analytics	Ab	ility to access Analytics data
	CU_VSB_Advisor	Ab	ility to access Advising/Scheduling
Central Office Only Administrator Role(s):			
ADD DELE		D	ESCRIPTION
	CU_VSB_Admin*	Al	pility to change system configuration
Data Permissions (SACR) Security:			
ADD DELET	E Academic Institution	Lis	at academic institution(s) user can access
In the absence of written signature: BPO may email approval to the appropriate campus party, per your campus' request process.			
Student Records - Campus Approval:			
Last Name:			First Name:
Signature:			Date:
Student Records - Central Approval: (if required)			
Last Name:			First Name:

** An approved Data Access Waiver may additionally be required for students, consultants and other non-full-time employees. Requirements can be found in the CUNY Information Technology Security Procedures found at security.cuny.edu under Policies and Procedures.

Date:

Signature: