



Center for Information Technology Student Employee – IT Access Form & Confidentiality Agreement

POLICY

The Center for Information Technology prohibits the unlawful or unauthorized access, use or disclosure of confidential and proprietary information obtained during the course of employment or other relationship with Bethune-Cookman University. As a condition of your student employment position, continued employment or relationship with Bethune-Cookman University, student shall be required to sign the B-CU Confidentiality Agreement.

For purposes of this policy, '**Confidential Information**' includes students' Financial Aid, Academic and personal information, Parents and B-CU Employees confidential information.

VIOLATION OF CONFIDENTIALITY POLICY

Individuals shall not access, use, or disclose Confidential Information in violation of the law or contrary to Bethune-Cookman University policies. Each student worker allowed by B-CU to have access to Confidential Information must maintain and protect against the unauthorized access, use or disclosure of Confidential Information. Any access, use or disclosure of Confidential information in any form - verbal, written, or electronic - which is inconsistent with or in violation of this Policy shall result in disciplinary action, including but not limited to, immediate termination of employment and loss of privileges as deemed appropriate by your department Director or CIT.

Any B-CU student employee must report any known or suspected incidents of access, use or disclosure of Confidential Information in violation of this Policy or in violation of the law.

CONFIDENTIALITY AGREEMENT

I, the undersigned, acknowledge that I received a copy of and read the B-CU CIT Confidentiality Policy.

As a condition of my student employment, I agree to abide by the requirements of that Confidentiality Policy.

I understand and agree that if I access, use or disclose Confidential Information in any form - verbal, written, or electronic - in a manner that is inconsistent with or in violation of the Confidentiality Policy, B-CU may impose disciplinary action, including but not limited to, immediate termination of employment and loss of privileges.

I understand that when I receive a username and password to access B-CU Student Information System (SIS), I have agreed to the following terms and conditions:

- The username and password assigned to me are equivalent to my signature, and I will not share those credentials with anyone.
- I will be responsible for any use or misuse of my access.
- I will NOT attempt to access B-CU Student Information System unless I have authorization from management.

I acknowledge that I have read the terms of this Confidentiality Agreement, and that I have received a copy.

Signature: _____ **Date:** _____

Print Name (Last & First): _____

B-CU ID#: _____

B-CU Email: _____



INSTRUCTIONS: Departmental Manager shall complete this portion of the form and submit to Human Resources for final approval. HR will then submit the approved Access Form to CIT Help Desk for processing.

DIVISION/DEPARTMENT: _____ / _____

ACADEMIC YEAR & TERM: _____ / _____

NAME (Last, First & Middle): _____

SSN (Last 5 digits): _____

POSITION/TITLE: _____

STUDENT EMPLOYEE TYPE:

- i. Federal Work Study
- ii. Work-Aid

APPLICATIONS SUITES:

- **JENZABAR ONE** (Specify Modules & Functions)

Module (s): _____
Functions: _____

- **FINANCIAL AID/POWERFAIDS**

Please note that as a **Department Manager** requesting Student Employee's access to B-CU students, parents and employees confidential information, it is also your responsibility to make sure Bethune-Cookman University Confidentiality Policy is reinforced and followed.

Print Departmental Manager Name (Last, First & Middle): _____

Manager Signature: _____ **Date:** _____

Print HR Administrator Name (Last, First & Middle): _____

HR Administrator Signature: _____ **Date:** _____