



REQUEST SYSTEM
USER ID SETUP

NAME:		gtID#	
DEPARTMENT:		PHONE	
BUILDING:		ROOM #:	
E-MAIL:		GT E-MAIL LOGIN:	

SUPERVISOR INFORMATION			
NAME:		PHONE	
TITLE:		DATE:	
SIGNATURE		E-MAIL	
AUTHORIZED USAGE:		REQUESTOR <input type="checkbox"/>	INQUIRER <input type="checkbox"/>

I, _____, agree to utilize the data contained in the gtID# Request System for the sole purpose of fulfilling my job responsibilities. When disclosing the information contained in the gtID# Request System, I agree to adhere to the requirements of the following Acts/Agreements:

_____ The Privacy Act of 1974
Initial (<http://www.justice.gov/opcl/privacy-act-1974>)

_____ Family Educational Rights and Privacy Act (FERPA)
Initial (<http://www.registrar.gatech.edu/alumni/parentinfo.php>)

_____ Georgia Institute of Technology Social Security Number Policy
Initial (<http://www.gtid.gatech.edu/SSN/>)

Furthermore, I agree to adhere to the following policies regarding data access and computer network usage:

_____ Georgia Institute of Technology Data Access Policy
Initial (<http://policies.gatech.edu/computer-and-network-usage-and-security/>)

_____ Georgia Institute of Technology Computer and Network Usage Policy
Initial (<http://policies.gatech.edu/computer-and-network-usage-and-security/>)

Signature

Date

WHITE - CARD CENTER

YELLOW - USER