# MyCampus Security Access Application BI/Query

**Once you have completed your details, the named approver (see below) for your College/ School/ Institute /Service must approve your access request before access can be granted.**

**Your Contact Details** all fields required

~~Top of Form~~

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Text Box Tools tab to change the formatting of the pull quote text box.]

Forename

Surname

College/School/Institute/Service

Staff Number

Login User ID (GUID)

University Email Address

University Tel No/Ext

University Address

Name of person who will approve your access request

**(See below for guidance on Named Authority/Approver)**

**Named Authority/Approver**

1. Head of School / Research Institute Admin or Head of Service (access for School /RI /Services staff)

2. Head of Academic & Student Administration (access for College staff)

**Continued overleaf**

**MyCampus BI Query Access Requirements**

Please tick the appropriate boxes to identify the access required.

|  |  |
| --- | --- |
| **BI Query Models**  | **Access Required** |
| MyCampus Direct Admissions |  |
| MyCampus UCAS/GTTR Admissions |  |
| MyCampus Student Records |  |

**Data Protection Act 1998.**

Declaration: I understand that authorisation for access to university records is granted strictly on an individual basis for specific and limited purposes (as outlined above) in accordance with the requirements of my job. It is prohibited for me to use my authorisation for access for any other purposes. It is prohibited to transfer my authorisation for access to any other individual. I further understand that any data held in, or extracted from, or input into, central records must be processed in accordance with the provisions of the Data Protection Act 1998.

***Once you have completed this part of the form please email it to the named approver (as above) for their authorisation.***

**Continued overleaf**

***Approver Use Only***

***NOTE: Access should only be approved if relevant to staff member’s job role.***

|  |  |  |
| --- | --- | --- |
| **Action** | **Date** | **Approver Name/Signature** |
| Application form received |  |  |
| Approval granted  | YES | Application forwarded to IT Services |  |  |
|  | NO | Returned to requester |  |  |

*Once you have approved this application please send as an email attachment, from your own email account, to* ***slsd@glasgow.ac.uk***

***SLSD Use Only***

|  |  |  |
| --- | --- | --- |
| **Action** | **Date** | **By** |
| Approved application form received |  |  |
| Authorisation |  |  |
| Form sent to IT Services |  |  |

***IT Services Use Only***

|  |  |  |
| --- | --- | --- |
| **Action** | **Date** | **By** |
| Application form received |  |  |
| Access created/updated |  |  |
| Applicant notified |  |  |