

# ARGOS Account Request Form



<b>Name (printed):</b>			
<b>MCTC ID#:</b>		<b>Phone #:</b>	
<b>MCTC Username:</b>		<b>Department:</b>	

As an approved ARGOS account user, I understand that all usage and information accessed by this account remains the property of MCTC and that this account shall only be used to conduct the business of the College. I agree to keep this account secure, to not transfer access to any other individual or group, and to treat the information to which my account has access to in a confidential manner. I further agree that I have read, understand, and have signed the following: IT Acceptable Use Policy, Information Security Policy, & Information Services Confidentiality Agreement.

I understand that I am expected to utilize recorded training videos to learn ARGOS basic navigation: how to log in/out, how the system is organized, how to run datablocks and reports. I understand that I will be granted Report Viewer, Report Writer, and/or Datablock Designer privileges to ARGOS based on my job function and training. I also understand that, depending on my job function, I may need to enroll in additional ARGOS training classes.

My signed Confidentiality Agreement is on file with IS.     I have attached a signed Confidentiality Agreement.

<b>Requestor's Signature:</b>		<b>Date:</b>	
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**To be approved by the Supervisor of the Account Applicant:**

I request that an ARGOS account be created for the above-named person. Should the status of this individual change (e.g. termination, transfer to another department, etc.), I agree to notify Information Technology to have the assigned Banner access for this account modified or deactivated.

As stated in the Information Security Policy, I assume responsibility for providing proper Banner training and ensuring that the employee adheres to the information security safeguards. I further agree that my department shall be held responsible for any misuse or improper actions by the account owner.

I am requesting the following (**check all that apply**):

**Report Folder:**

Academics     Account Receivables     Advisors/Counselors     Deans & Chairs     Faculty  
 Finance     Financial Aid     Institutional Research     MCTC/General Demographics  
 Presidents Council     Recruiting/Admissions     Registrar  
 Other: \_\_\_\_\_

<b>Supervisors Name:</b>			
<b>Supervisor's Signature:</b>		<b>Date:</b>	