

| Name (printed): |             |  |
|-----------------|-------------|--|
| MCTC ID#:       | Phone #:    |  |
| MCTC Username:  | Department: |  |

As an approved Banner 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 Banner basic navigation, how the system is comprised of menus and forms, the naming conventions for the assigned forms, how to search for records, & how each department and Banner module works as a collective. I understand that I will be granted query and/or update privileges to Banner forms based on my job function. I also understand that, depending on my job function, I may need to enroll in additional Banner training classes.

| □ My signed Confidentiality Agreement is on file with IT/HR |  | I have attached a signed Confidentiality Agreement |       |  |
|---|--|--|-------|--|
| Requestor's Signature:                                      |  | C  | Date: |  |

| To be approved by the Supervisor of the Account Applicant:  |       |  |  |  |  |
|---|-------|--|--|--|--|
| I request that a Banner account be created for the above-named employee. 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.<br>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. |       |  |  |  |  |
|   |       |  |  |  |  |
| Supervisor Name:  |       |  |  |  |  |
| Signature:  | Date: |  |  |  |  |

| Forms, Modules Requested |         |                 |           |                |  |  |
|--------------------------|---------|-----------------|-----------|----------------|--|--|
| Admissions               | Student | 🔲 Financial Aid | Banner AR | Banner Finance |  |  |
| Forms:                   |         |                 |           |                |  |  |
| Additional Notes: _      |         |                 |           |                |  |  |

After completing this form, please submit it to IT via a support ticket at https://support.mctc.edu