

# BANNER Panthertracks Advisor/Degree Works Access Request

**Instructions: Complete, print, sign and route the form through the Registrar's Office. This form will be used to grant "advisor" access. INCOMPLETE forms will be returned.**

**Do you also need access to Degree Works? If yes, select a role below.**

Degree Works is the degree advisement and auditing system. If student degree completion advisement is a responsibility of your job you will need access.

- ☐ REG (access to manage user roles, script, modify degree audits; reserved for Degree Works software administrators)
- ☐ ADV (access to view degree audits and grant exceptions)
- ☐ ADVX (access to view degree audits and submit petitions)
- ☐ GENL (access to view degree audits)

PID: \_\_\_\_\_  
(For Office Use Only)

Last Name	First Name	M.I.	Maiden Name
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Title	Division/Department
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Office Phone	University Email
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The following information will be used to determine the current existence of a general person record within the Banner database and prevents creation of duplicate records:

Home Address	City	State	ZIP
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Home Phone	Last 4 Digits of SSN
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Please check all that apply about you:

- ☐ I have prior experience using Panthertracks.
- ☐ I have attended this university as a student.
- ☐ I have donated to this university.
- ☐ I have been an instructor at this university.
- ☐ I have been an advisor at this university.

	Print Name	Signature & Date
Supervisor		
Registrar		
Information Resource Supervisor:		

## Acknowledge Request of Appropriate Banner Access

(To be filled out by the requesting supervisor)

\_\_\_\_\_  
Print User Name

I acknowledge that as the user's supervisor all access I am requesting is appropriate for this user and I am ultimately responsible for ensuring that access is appropriate.

\_\_\_\_\_  
Supervisor  
Initials

I acknowledge that the access being requested is relevant to the user's job responsibilities as defined in the user's job description.

\_\_\_\_\_  
Supervisor  
Initials

I acknowledge that I am responsible for ensuring that the user is properly trained in business processes and practices relevant to the user's responsibilities relating to the Banner system.

\_\_\_\_\_  
Supervisor  
Initials

I understand the internal controls required in my department and acknowledge that access being requested does not conflict with internal control policies and procedures within my department and requested access does not create a conflict of interest not only within the Banner system, but also any business process or system the user may be responsible for outside of Banner.

\_\_\_\_\_  
Supervisor  
Initials

I agree to respond timely when asked to review the user's access on a periodic basis and any unnecessary access will be properly communicated to the Office of Information Resource Management.

\_\_\_\_\_  
Supervisor  
Initials

I acknowledge that if this user's employment status (i.e. termination, transferring departments, etc.) with this university changes it will be properly communicated to the Office of Information Resource Management.

\_\_\_\_\_  
Supervisor  
Initials

I, \_\_\_\_\_, do hereby acknowledge that I will abide by this agreement and that failure to do so

(Print Supervisor Name)

may lead to University disciplinary action.

\_\_\_\_\_  
Supervisor Signature/Date

Insert Copy of TrainTraq Transcript Here  
(Must show completion of FERPA and Information Security  
Awareness Training)