



Office OF The Registrar

SIS (Student Information System) Authorization Request

1. Please complete the information listed below.

Name _____

Social Security # _____

E-Mail address _____

Department _____

SIS Operator ID _____ (Will be assigned by MIS for new Accounts)

Security Template _____ (Will be assigned by Registrar)

Approval Signature _____ (New accts require Dept. Chair or Director approval)

Print Approval Name _____

2. SIS Value Based Security Information (Completed by Registrar)

Home School: _____ Dept: _____ Primary Area: MS

ORG Security Class: _____ A (Dept Specific) U (Universal)

Authorized Academic Unit: N - NJIT Main Campus

Authorized Colleges: _____

Authorized Departments: _____

Authorized Majors: _____

3. Processing Procedures

a. Submit completed form to Registrar in-person or via fax 973-802-1854.

b. Registrar will assign security template and forward this request to MIS via facsimile for processing.

c. Upon receipt MIS will set up your account and inform you via e-mail your SIS operator ID and temporary password.

d. Contact coles@njit.edu for status of request.

e. Review [SIS On-line Training](#)

STATEMENT OF UNDERSTANDING OF THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT

I understand that by virtue of my employment with the New Jersey Institute of Technology, I may have access to records which contain individually identifiable information, the disclosure of which is prohibited by the Family

Educational Rights and Privacy Act of 1974. I acknowledge that I fully understand that the intentional disclosure by me of this information to any unauthorized person, could subject me to criminal and civil penalties imposed by law. I further acknowledge that such willful or unauthorized disclosure also violates NJIT's Data Access policy and could constitute just cause for disciplinary action including termination of my employment regardless of whether criminal or civil penalties are imposed.

Date
Name (Print)
sisapp

Employee's Signature

Employee's