Kent State University
Request for **Handshake** Access

Instructions for Access Management: Put on file in Xtender

Instructions: 1) Complete sections A & B. 2) Obtain signature of security admin (section C) 3) Send to Career Exploration & Development (info below)

Section 1 – User Information, to be completed by requestor or requesting dept. security administrator

(A) Employee Information		
Employee Name	Campus	Phone
Department		Position/Title
FlashLine User Name	@kent.edu Kent State	ID Number
(B) Access requirements		
Request type (check one): Add	d User Archive User (Remove)	Change Permissions Additional Access
Purpose		
(C) Unit Authorization		
Unit Security Admin Name		
Unit Security Admin Signature		Date
NOTE FOR ADMIN AUTHORIZING: E agreement on file or you have atta		hat the requestor has a signed confidentiality
Section 2 – Requested Access	Send to Career Exploration and Develo	pment at
☐ Access Control – IS use only		
_	CED use only (Account Manager)	
• •	•	nts, plus all Career Resource Staff features
	er advising/programming/events/fairs	s and related work
Advisor/Faculty – Student AccordFirst Destination Survey – For th	ose managing First Destination Survey	reporting
•	tess for student employees/graduate a	
☐ Other – describe access request	, ,	
Handshake Data Steward Signature	:	Date
Section 3 – To be completed by Info	ormation Services	
Completed by		Date