Kent State University
Request for Assigned Advisors Access

Instructions: Collect signatures and Scan to email or FAX authorized form to Access Management Group 330-672-3253 or AMGroup_DCO@kent.edu. Call for assistance at 330-672-1366.

This form grants access only to the advisor assignment application in Self-Service Banner (SSB). This access allows you to modify the rules within the automated advisor system in SSB. If you need access to advisor maintenance (to add, delete, and maintain advisor assignments) in Internet Native Banner (INB) you must complete the Request for Banner Student access form and select ST_GSTU_02_MAINTAIN_ADVISORS under Registrar.

Section 1 - User information, to be completed by requesting department security administrator

(A) Employee Information

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Campus Phone</th>
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</thead>
<tbody>
<tr>
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<table>
<thead>
<tr>
<th>Department</th>
<th>Position/Title</th>
<th>Flashline User ID</th>
<th>Kent State ID</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>@kent.edu</td>
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</tbody>
</table>

(B) Access requirements

Request type (check one): ☐ Add User, ☐ Remove User, ☐ Replace Permissions, ☐ Additional Access

Access to (check all that apply): ☐ Production ☐ Test

Purpose for access __________________________________________________________

NOTE: A signed confidentiality agreement must accompany this request unless the user has already submitted one.

Section 2 – Authorized Academic Units

Assigned Advisors (Charity Miller/Douglas Nehez)

Select Authorized Academic Unit(s) | Signature of Academic Unit Security Administrator

☐ Aeronautics & Engineering (AR)
☐ Architecture and Environmental Design (AE)
☐ Arts and Sciences (AS)
☐ Ashtabula Campus (AC)
☐ Business (BU)
☐ Communication and Information (CI)
☐ East Liverpool Campus (EC)
☐ Education, Health, Human Services (EH)
☐ Geauga Campus (GC)
☐ Nursing (NU)
☐ College of Public Health (PH)
☐ Salem Campus (SA)
☐ Stark Campus (ST)
☐ School of Digital Sciences (DS)
☐ The Arts (CA)
☐ Trumbull Campus (TR)
☐ Tuscarawas Campus (TU)
☐ University College (UC)
☐ University Advising
☐ System Administrator (for IRSS use only)

Section 3 – Data Steward Signature (Charity Miller/Douglas Nehez)

Signature ___________________________________________ Date __________

Section 4 - To be completed by Department of Information Technology

Completed by ___________________________________________ Date __________

☐ Verify confidentiality agreement, ☐ Grant approved access, ☐ Notify dept security administrator, ☐ Notify data steward

Last Revised: 03/26/2019