

**Yale University**  
**Student Financial and Administrative Services**

**Faculty Grading System**  
**Notification of Departmental Proxy Status**

Please FAX notification to 2-2787 or deliver to FGS, 246 Church Street, 3<sup>rd</sup> floor

Note: This notification must be signed both by the proxy and by either the department's Chair, DGS, or DUS.

Department: \_\_\_\_\_

Proxy's Name: \_\_\_\_\_

Proxy's Yale NetID: \_\_\_\_\_ Phone: \_\_\_\_\_

Proxy's Yale Email Address: \_\_\_\_\_

**Acceptance of Responsibility Regarding Confidentiality**

I understand my acceptance of proxy status for the Faculty Grading System signifies I accept the responsibility for complying with Yale's Policy for the Release of Student Information. I have read the section of the Yale University Policy Statement on Student Records (Buckley Amendment) pertaining to disclosure of information (see separate document). By my signature below, I understand and agree to preserve the security and confidentiality of information I access.

I understand that when my need to access student information differs from that stated in this Access Request document, I will inform the Office of Student Financial and Administrative Services.

Students are not allowed to have access to the Banner Student System except to the extent that they can view and update their own records via the web-based Student Information System. I understand I am responsible for the security of my password. I understand I am responsible for actions taken and work performed under my User ID and I should not allow others to do work in Banner under my User ID.

\_\_\_\_\_  
Signature of Proxy

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Chair, DGS, or DUS

\_\_\_\_\_  
Date

Chair       DGS       DUS

Please check the appropriate box(es).