

Yale University
Student Financial and Administrative Services

Request for Access to Yale College Course Evaluation Self-Service for Chairs

Please FAX requests to 2-2787

Note: This form is for use by any Chair or Proxy who will be using the Yale College Chair Self-Service system. All proxy requests must be authorized and signed by the departmental chair. Chair requests are verified by Student Information Technology Services and do not need an authorizing signature.

All requestors must sign the Acceptance of Responsibility statement.

Employee requesting access to the Chair Self-Service System.

Name (please print) _____ Phone _____

Title _____

Department(s) _____ Building and Room Number _____

Net ID _____ Fax _____ Email Address _____

Type of access requested:

- Chair
- Proxy (Assistant to Chair)

Acceptance of Responsibility Regarding Confidentiality

I understand that my acceptance of access to the Chair Self-Service System signifies I accept responsibility for complying with Yale College's policy regarding the security and confidentiality of course evaluations. My signature below signifies I understand and agree to preserve the security and confidentiality of any course evaluation information I access.

I understand that when my need to access Yale College course evaluations changes from that stated in this Access Request document, that is when I am no longer Chair or Proxy, I will inform the Office of Student Information Technology Services so that they can end my access.

I understand I am responsible for the security of my password. I understand I am responsible for actions taken and work performed under my NetID and I should not allow others to use my NetID.

Signature & Title of Yale Employee

Date

Departmental Authorization for proxies:

Name & Title of Authorizer (please print) _____

Signature of Authorizer _____ Date _____