

Texas A&M University-Commerce

Maximus User ID Request

NAME: _____ (Print clearly!)

Campus Wide ID/UIN: _____

DEPARTMENT: _____ Office Phone: _____

Network Username: _____

ACCOUNT ROLE: (Check only one)

Customer

Supervisor

Administrator

Tradesman / Tech

Manager

Other _____

User's Statement of Responsibility:

I understand that I will be in violation of University regulations and state and federal law if I gain or help others gain unauthorized access to Maximus. I acknowledge that neither I nor anyone else possesses the authority to allow anyone to use my username or password.

I understand that by the virtue of my employment with Texas A&M University-Commerce, I may have access to records which contain individually identifiable information. The disclosure of individually identifiable information is prohibited by the Family Educational Rights and Privacy Act of 1974. I fully understand that the intentional disclosure 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 violates Texas A&M University's policy and could constitute just cause for disciplinary action. Disciplinary action could include termination of my employment regardless of whether criminal or civil penalties are imposed.

Signature below indicates acceptance of the Statement of Responsibility.

Signature _____ Date _____

Dept. Head Signature _____ Date _____

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CTIS Use Only

ID Verified by _____ Date Received: _____

Added by _____ Date Added _____