

Security Responsibility and Confidentiality Agreement

DOCUMENT INFORMATION

Document Title	Security Responsibility and Confidentiality Agreement															
Document Type	<input type="checkbox"/> Bylaws <input type="checkbox"/> Policy Document <input type="checkbox"/> Procedures <input type="checkbox"/> Guidelines <input checked="" type="checkbox"/> Form															
Office/Unit	Information Technology Services															
Document Owner																
Contact Information	<table border="1"><thead><tr><th>Office</th><th>Name</th><th>Phone</th><th>Email</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td></tr></tbody></table>	Office	Name	Phone	Email											
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Approval Date	June 2, 2004															
Approved by	President's Cabinet															
Effective Date	June 2, 2004															
Review Date /Schedule																
Revision History																

DOCUMENT CONTENT

The information contained in the various databases and print files used by SUNY at Fredonia is confidential in nature and is only to be used in connection with University, SUNY, and State business following the SUNY Fredonia Information Security Program and the Family Educational Rights and Privacy Act of 1974 (FERPA) regulations. Access to the data is granted to selected offices with the understanding that the information and any reports generated from the system will be accessible only to appropriate personnel for legitimate business purposes.

As an employee of the State University of New York at Fredonia, I recognize that I may have access to or be required to handle certain information that is confidential, private, and proprietary for the performance of my duties.

I am aware that:

- Data should be accessed and made available only to authorized persons for College business by authorized departmental personnel following approved departmental procedures;
- Assigned functional capabilities (user codes, access to equipment, data or restricted areas) are to be used ONLY to perform my assigned duties;
- Any breach of confidentiality or abuse of my position will result in dismissal from my job and possible judicial action.

I agree to follow departmental policies and procedures with respect to confidentiality of records, equipment, user codes and general practices as outlined by my employer, and recognize that failure to do so will be grounds for disciplinary action by SUNY at Fredonia Judicial Office for violations to the Student Code of Conduct.

I have discussed this policy with my immediate supervisor.

Employee Printed Name

Employee Signature/Date

Supervisor Signature/Date

This signed form should be forwarded to Payroll Services, Maytum Hall, with a copy retained in the employee's hiring department personnel file.

FAQ's											
Keywords											
Category(s)	<table border="1"> <tr> <td><input type="checkbox"/> Academic Affairs</td> <td><input type="checkbox"/> Operational</td> </tr> <tr> <td><input type="checkbox"/> Advancement</td> <td><input type="checkbox"/> Personnel</td> </tr> <tr> <td><input type="checkbox"/> Financial</td> <td><input type="checkbox"/> School/College</td> </tr> <tr> <td><input type="checkbox"/> Governance</td> <td><input type="checkbox"/> Student Life</td> </tr> <tr> <td><input checked="" type="checkbox"/> ITS</td> <td></td> </tr> </table>	<input type="checkbox"/> Academic Affairs	<input type="checkbox"/> Operational	<input type="checkbox"/> Advancement	<input type="checkbox"/> Personnel	<input type="checkbox"/> Financial	<input type="checkbox"/> School/College	<input type="checkbox"/> Governance	<input type="checkbox"/> Student Life	<input checked="" type="checkbox"/> ITS	
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Sub-Category(s)											