

Date

Confidentiality and Ethics Agreement

_, acknowledge that in the course of my work or ncement at Humboldt State University, I may have I of which may be confidential and/or privileged eled" or identified as confidential.
either during or after my assignment with the office, erwise disclose to any third party, or use for persona ctivities.
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Request for Raiser's Edge NXT Access

User information

Name			Humbol	Humboldt ID#		
			Effectiv			
Department		Pos	ition		Extension	
Approval						
Supervisor				Date:		
Raiser's Edge adn	ministrator			Date:		
Request						
New access	Modify access					
Employee	Volunteer	Student				

Please describe how you would like to use Raiser'e Edge (include the information you would like to be able to view):

Database administrator use only

Database View RE NXT Needs PCI Training?

Admin Gift Entry Yes

Director of Development Director of Development No

Director of Development

Edit 1

Marketing

Edit 2

Edit 2

PCI Entry 1 Admin
PCI Entry 2
View

Volunteer