

NMSU Analytics Portal Access - Instructions

Access to NMSU Analytical Reporting Portal is provided via the following procedure. Please read directions carefully. All incomplete/incorrect forms will be returned to the employee.

REQUEST ACCESS: Employee requesting access must complete Sections A and C. **In accordance with ARP 15.40, the Computer & Data Security training must be completed before access will be granted. The online training can be found by logging on to trainingcentral.nmsu.edu.**

Section A

By completing this form, employees can be granted access to one or more the following security classes:

- a. **Business, Finance and Human Resources Report Consumer** – provides access to consumers of financial, budgetary and human resources related reports. Authorization by the responsible Dean/Vice President/CC President is required.
- b. **Principal Investigator (PIs)**– provides NMSU sponsored research PI access to run and receive select grant and contract - related standard and analytical financial and human resources reports in the NMSU Analytics production environment. Access to this security class is authorized by the appropriate Dean/Vice President/CC President.
- c. **Human Resources Interface** – provides NMSU staff a minimal set of human resources data for those staff members with a job requirement of interfacing with and viewing human resource data. Access to this security class is authorized by the appropriate Dean/Vice President/CC President.
- d. **Research Administrative Support** – provides access to consumers who provide support for sponsored research awards. Access to this security class is authorized by the appropriate Dean / Vice President / Associate Dean for Research.

Section B

Please provide the name of the employee in Section 1 whose security access should be terminated. The Supervisor must also provide their own name along with signature and date in Section D. Submit the signed and completed form through a [TeamDynamix Ticket](#).

Section C

If employee access is being requested in Section A, employee must sign certification in Section C.

Section D

After signing the form, the employee must forward the form to their supervisor for approval/signature. If requesting access for an employee in Part A, the Supervisor will then forward the employee form to Dean/VP/CC President approver for signature (refer to **Administrative Rules and Procedures of NMSU – 2.35.1.2.3; General NMSU Information Technology Policies – 1.2.3**). No designee is allowed for this authorization.

For **Research Administrative Support** access, the Supervisor will forward to Dean/VP/CC President/Assoc Dean for Research. No designee is allowed for this authorization. Once all three signatures have been obtained, submit the signed and completed form through a [TeamDynamix Ticket](#). IT will make NMSU Analytics security class assignment(s) and notify employee once NMSU Analytics access has been granted.

TERMINATE ACCESS: Supervisors requesting to terminate employee access must complete Section B and sign Section D as Supervisor.



SECTION 1: REQUESTOR INFORMATION

Employee Name: _____ Employee Title: _____

Aggie ID: _____ E-mail Address: _____ Phone: _____

NMSU Department/Unit: _____ College/Campus: _____ Employee MyNMSU Username: _____

SECTION 2: REQUEST DETAILS

SECTION A: Request Access

Security Class:

- ☐ Grant Access: Business, Finance and Human Resources Report Consumer
- ☐ Grant Access: Principal Investigator
- ☐ Grant Access: Human Resources Interface
- ☐ Grant Access: Research Administrative Support

Special instructions:

SECTION B: Terminate Access

☐ Terminate Access Date Required: _____

SECTION C: Certification

I certify that I have read and signed a New Mexico State University Non-Disclosure Statement and agree to the employee responsibilities. Within NMSU, I understand employees are authorized access to University records only to the extent necessary to perform their official university duties, and are responsible for protecting such information against unauthorized access or disclosure. I agree to abide by all appropriate NMSU and departmental policies and procedures.

| | | | |
|------------------------|----------------|--------------------|---------------|
| _____ Employee Name | _____ Title | _____ Signature | _____ Date |
|------------------------|----------------|--------------------|---------------|

SECTION D: Official Approval

By signing, I acknowledge and approve global NMSU Analytics access for the above named employee. I certify this request for NMSU Analytics Portal Access is necessary to cover a critical business need within the above named NMSU Department/Unit and College/Campus. Access is being granted in accordance with Administrative Rules and Procedures of NMSU 2.35.1.2.3 and General NMSU Information and Communication Technologies Policies 1.2.3.

| | | | |
|--------------------------|----------------|--------------------|---------------|
| _____ Supervisor Name | _____ Title | _____ Signature | _____ Date |
|--------------------------|----------------|--------------------|---------------|

| | | | |
|--|----------------|--------------------|---------------|
| _____ Dean/VP/CC President Approver (No Delegates)* (For Research Administrative Support access, Assoc Dean for Research is also authorized to sign) | _____ Title | _____ Signature | _____ Date |
|--|----------------|--------------------|---------------|

**Please refer to instructions on first page for more information.*

New Mexico State University Non-Disclosure Statement

This Non-Disclosure Agreement is intended to define the responsibilities of those employees who have access to NMSU records that contain sensitive or confidential information about students, employees, donors or other individuals, and to record his or her recognition and acceptance of that responsibility.

New Mexico State University maintains the confidentiality and security of records in compliance with the Family Educational Rights and Privacy Act of 1974 (FERPA), the Health Insurance Portability and Accountability Act (HIPAA) and the Gramm-Leach-Bliley Act (GLBA), in addition to other federal and state laws. These laws pertain to the security and privacy of personal academic, medical and financial information, along with identifying information such as Social Security Numbers.

FERPA protects student records. FERPA requires post-secondary educational institutions and agencies to conform to fair information practices in their handling of student data. Among the provisions of the act are the requirements that data be used only for intended purposes and that those responsible for student data take reasonable precautions to prevent misuse of it. Examples include Social Security Numbers, grades, date of birth, etc.

HIPAA protects all medical records and other individually identifiable health information used or disclosed in any form, whether electronically, on paper or orally.

GLBA protects private, non-public information of individuals. Private, non-public information consists of information such as name, Social Security Number, date and location of birth, gender, credit card numbers and driver's license numbers.

Within NMSU, employees are authorized access to University records only to the extent necessary to perform their official university duties, and are responsible for protecting such information against unauthorized access or disclosure.

EMPLOYEE: Recognizing this responsibility, I agree to the following (please initial each line):

_____ I will access university records only as required to perform my assigned duties.

_____ I will not access student or employee information that is not necessary to carry out my job. This includes the records of my children, spouse, significant other, parents, other relatives, friends and acquaintances.

_____ I will store information under secure conditions and make every effort to ensure individuals' privacy.

_____ I will not divulge, copy, release, sell, loan, review, alter or destroy records except as properly authorized by the appropriate university official within the scope of applicable state or federal laws, record retention schedules and internal policies.

_____ I will forward all requests for information via an open records request to the university's General Counsel for guidance. I will not release information covered by these requests until instructed to by university's General Counsel or my supervisor.

_____ When I release student information, I will divulge only the information regarded as "directory" or public information, specifically the student's name, address, telephone listing, date and place of birth, major field of study, classification, participation in any officially recognized activities and sports, weight or height of members of athletic teams, dates of attendance, degrees and award received and most previous recent educational institution attended.

_____ I will not release any information about a student who has requested total suppression of information, nor will I release any optional directory information on an employee who has requested to have his/her directory information suppressed.

_____ I will not release any information about students, staff or employees that was requested on the basis of non-public information (for example – names of all international students, names of all students with a GPA of less than 2.0, etc.)

_____ I have read the NMSU Non-Disclosure Agreement and agree to comply with its provisions. I understand that failure to comply may result in disciplinary action, including termination of employment.

AR NMSU Analytics Access

ROUTING

IT-Data Center &
Access Control
[Submit a TeamDynamix
Ticket](#)

Instructions: Use this form to request AR NMSU Analytics access. Sections 1-3 must be completed. **In accordance with ARP 15.40, the Computer & Data Security training must be completed before access will be granted. The online training can be found by logging on to trainingcentral.nmsu.edu.** E-mail the completed form to security_admin@nmsu.edu. All requests will be forwarded to the AR Data Custodian for approval.

SECTION 1: REQUESTOR INFORMATION

Employee Name: _____ Employee Title: _____

Employee ID#: _____ E-mail Address: _____ Phone: _____

NMSU Department/Unit: _____ College/Campus: _____ Employee MyNMSU Username: _____

SECTION 2: REQUEST DETAILS

- ☐ Add ☐ Remove AR_Custodian (NMSU Analytics)
- ☐ Add ☐ Remove AR_Custodian (NMSU Analytics (User -Test))
- ☐ Add ☐ Remove AR_Collections (NMSU Analytics)
- ☐ Add ☐ Remove AR_Recv_Clerk (NMSU Analytics)
- ☐ Add ☐ Remove AR_EXT_Administrator (NMSU Analytics)
- ☐ Add ☐ Remove AR_EXT_Student (NMSU Analytics)
- ☐ Add ☐ Remove AR_EXT_Retiree (NMSU Analytics)

SECTION 3: OFFICIAL APPROVAL

Employee Name _____ Employee Signature _____ Date _____

Dean/VP/Director Approver Name _____ Dean/VP/Director Approver Signature _____ Date _____

SECTION 4: INTERNAL DEPARTMENT USE ONLY (Data Custodian Authorization)

UAR Director (AR Data Custodian) _____ Data Custodian Signature _____ Date _____

Budget NMSU Analytics Access

ROUTING

IT-Data Center &
Access Control
[Submit a TeamDynamix
Ticket](#)

Instructions: Use this form to request Budget NMSU Analytics access. Sections 1-3 must be completed. **In accordance with ARP 15.40, the Computer & Data Security training must be completed before access will be granted. The online training can be found by logging on to trainingcentral.nmsu.edu.** Submit the signed and completed form through a [TeamDynamix Ticket](#). All requests will be forwarded to the Budget Data Custodian for approval.

SECTION 1: REQUESTOR INFORMATION

Employee Name: _____ Employee Title: _____

Employee ID#: _____ E-mail Address: _____ Phone: _____

NMSU Department/Unit: _____ College/Campus: _____ Employee MyNMSU Username: _____

SECTION 2: REQUEST DETAILS

- ☐ Add ☐ Remove BUD_Custodian (NMSU Analytics)
- ☐ Add ☐ Remove BUD_Custodian (NMSU Analytics (User-Test))
- ☐ Add ☐ Remove BU_EXT_ACES (NMSU Analytics)
- ☐ Add ☐ Remove BU_EXT_ACES_AES (NMSU Analytics)
- ☐ Add ☐ Remove BU_EXT_ACES_CES (NMSU Analytics)
- ☐ Add ☐ Remove BU_EXT_Athletics (NMSU Analytics)
- ☐ Add ☐ Remove Shared_VPBFHR_BUDGET (NMSU Analytics)

SECTION 3: OFFICIAL APPROVAL

Employee Name _____ Employee Signature _____ Date _____

Dean/VP/Director Approver Name _____ Dean/VP/Director Approver Signature _____ Date _____

SECTION 4: INTERNAL DEPARTMENT USE ONLY (Data Custodian Authorization)

Budget Director (Budget Data Custodian) _____ Data Custodian Signature _____ Date _____

Finance Data Custodian Access

ROUTING

IT-Data Center &
Access Control
[Submit a TeamDynamix
Ticket](#)

Instructions: Use this form to request Finance Data Custodian NMSU Analytics access. Sections 1-3 must be completed. In accordance with ARP 15.40, the Computer & Data Security training must be completed before access will be granted. The online training can be found by logging on to trainingcentral.nmsu.edu. E-mail the completed form to security_admin@nmsu.edu. All requests will be forwarded to the Finance Data Custodian for approval.

SECTION 1: REQUESTOR INFORMATION

Employee Name: _____ Employee Title: _____

Employee ID#: _____ E-mail Address: _____ Phone: _____

NMSU Department/Unit: _____ College/Campus: _____ Employee MyNMSU Username: _____

SECTION 2: REQUEST DETAILS

- ☐ Add ☐ Remove FIN_Custodian (NMSU Analytics)
- ☐ Add ☐ Remove FIN_Custodian (NMSU Analytics (User-Test))
- ☐ Add ☐ Remove FIN_CUSTODIAN_SENSITIVE_DATA (NMSU Analytics)

SECTION 3: OFFICIAL APPROVAL

Employee Name _____ Employee Signature _____ Date _____

SECTION 4: INTERNAL DEPARTMENT USE ONLY (Data Custodian Authorization)

Controller (Finance Data Custodian) _____ Data Custodian Signature _____ Date _____

HR NMSU Analytics Access

ROUTING

IT-Data Center &
Access Control
[Submit a TeamDynamix
Ticket](#)

Instructions: Use this form to request HR NMSU Analytics access. Sections 1-3 must be completed. **In accordance with ARP 15.40, the Computer & Data Security training must be completed before access will be granted. The online training can be found by logging on to trainingcentral.nmsu.edu.** E-mail the completed form to security_admin@nmsu.edu. All requests will be forwarded to the HR Data Custodian for approval.

SECTION 1: REQUESTOR INFORMATION

Employee Name: _____ Employee Title: _____

Employee ID#: _____ E-mail Address: _____ Phone: _____

NMSU Department/Unit: _____ College/Campus: _____ Employee MyNMSU Username: _____

SECTION 2: REQUEST DETAILS

- ☐ Add ☐ Remove HR_Custodian (NMSU Analytics)
- ☐ Add ☐ Remove HR_Custodian (NMSU Analytics (User-Test))
- ☐ Add ☐ Remove HR_Internal (NMSU Analytics)
- ☐ Add ☐ Remove HR_Internal (NMSU Analytics (User-Test))
- ☐ Add ☐ Remove HR_Internal_EMS (NMSU Analytics)
- ☐ Add ☐ Remove HR_Internal_PAY (NMSU Analytics)
- ☐ Add ☐ Remove HR_EXT_PSL (NMSU Analytics)
- ☐ Add ☐ Remove HR_EXT_EXEC_SUPPORT (NMSU Analytics)

SECTION 3: OFFICIAL APPROVAL

Employee Name _____ Employee Signature _____ Date _____

Dean/VP/Director Approver Name _____ Dean/VP/Director Approver Signature _____ Date _____

SECTION 4: INTERNAL DEPARTMENT USE ONLY (Data Custodian Authorization)

Dir, Payroll/HRIS (HR Data Custodian) _____ Data Custodian Signature _____ Date _____

Instructions: Use this form to request RA Custodian NMSU Analytics access. Sections 1-3 must be completed. **In accordance with ARP 15.40, the Computer & Data Security training must be completed before access will be granted. The online training can be found by logging on to trainingcentral.nmsu.edu.** E-mail the completed security_admin@nmsu.edu. All requests will be forwarded to the Dir, Post Award Admin (RA Data Custodian) for approval.

SECTION 1: REQUESTOR INFORMATION

Employee Name: _____ Employee Title: _____

Employee ID#: _____ E-mail Address: _____ Phone: _____

NMSU Department/Unit: _____ College/Campus: _____ Employee MyNMSU Username: _____

SECTION 2: REQUEST DETAILS

☐ Add ☐ Remove RA_Custodian (NMSU Analytics)

☐ Add ☐ Remove RA_Custodian (NMSU Analytics (User-Test))

☐ Add ☐ Remove RA_Internal (NMSU Analytics)

☐ Add ☐ Remove RA_Internal (NMSU Analytics (User-Test))

SECTION 3: OFFICIAL APPROVAL

Employee Name _____ Employee Signature _____ Date _____

SECTION 4: INTERNAL DEPARTMENT USE ONLY (Data Custodian Authorization)

Dir, Post Award Admin (RA Data Custodian) _____ Data Custodian Signature _____ Date _____