## **CUNY Coursedog User Access Request Form**

**Please note:** This form is required in order to request access to the Coursedog system. This form must be approved by the employee's manager. Employees may NOT approve or grant access for themselves. For transferring employees, a separate form must be completed from the Campus and/or Department transferring FROM and TO in order to modify access in both areas. This request must be made in advance of the effective date of the personnel action.

EMPLOYEE INFORMATION SECTION (Please Print):							
Last Name:	First Name:	MI:					
CUNYfirst (Empl ID)*:	Job Title:						
Business Unit / Campus:	Dept / Office:						
Work Phone:	Ext: CUNY email address:						
Employee: Full time Part time If you are a student, please specify college:							
CONFIDENTIALITY STATEMENT (must be signed by the Employee):							
I understand that the data obtained from this system and its related components is considered confidential and MAY NOT be shared with anyone who is not authorized to receive such data. I understand that I am individually accountable for the use of my User ID in the Coursedog system.							
Improper use of my User ID could lead to revocation of access rights and further disciplinary proceedings in accordance with CUNY policies, CUNY IT Security Procedures (security.cuny.edu), rules and regulations, and applicable collective bargaining agreements.							
Employee's Signature:		Signature Date:					
In the absence of written signature: Employees may accept the Confidentiality Statement in CUNYfirst. Go to url:  http://home.cunyfirst.cuny.edu, log in and click on: Employee Self Service > Other Employee Tasks > CF Confidentiality Statement Agreement Code:							
Managerial Request (Requesting Supervisor):							
Business Unit / Campus:	Department / Office:						
Last Name:	First Name:	First Name:					
Signature:	Signature Date:						
In the absence of written signature: Please email your approval to the appropriate campus party, per your campus' request process.							

Action Requested (Check Only One): Add Access Remove Access Delete All Access

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Sch	edı	ıling ( <mark>select only one</mark> )				
	] [	CU_CDCS_DeptScheduler	Provide	es access to Schedule Edits for Departments.		
	]	CU_CDCS_Faculty_Workload	Provide	es access to Faculty Workload Edit.		
	]	CU_CDCS_ScheduleViewer	Provide	es view access to Schedule.		
		*CU_CDCS_CampusAdmin	Provide	es access to Administrative Component for Scheduling.		
	]	*CU_CDCS_DeptSchedulerAll	Provide	s access to Schedule Edits for Departments regardless of Phase / Term.		
Eve	nts	(select only one)				
		CU_CDEM_EventRequestor	Provide	es access to request Events.		
		CU_CDEM_EventViewerReporting	Provide	es access to view Events w/ additional reporting capabilities.		
		CU_CDEM_EventViewer	Provide	es access to view Events.		
		*CU_CDEM_CampusAdmin	Provide	es access to Adminstrative Component for Catalog.		
		*CU_CDEM_EventManager	Provide	es access to Managing Events.		
Cata	alog	g ( <mark>select only one</mark> )				
		CU_CDCM_CatalogViewer		s view access to catalog administrative pages.		
		*CU_CDCM_CampusAdmin	Provide	es access to Administrative Component for Catalog.		
		*CU_CDCM_DeptMaintainer	Provide	es edits access to specific dept catalog pages.		
Cur	ricu	ulum ( <mark>select only one</mark> )				
		*CU_CDCP_CampusCoordinator^	Provide	s access to submit BOT/CEP Curriculum proposals.		
		*CU_CDCP_CatalogAdmin^	Provide	s access to Registrar Administrative Component for courses.		
		*CU_CDCP_CurriculumViewer	Provide	s access to view BOT/CEP Curriculum proposals.		
		*CU CDCP DegreeWorksCoordinator	Provide	s access to perform Scribe Generator.		
		*CU_CDCP_DegreeMapCoordinator	Provide	s access to create DegreeMaps for program requirements.		
		pproval from theOffice of University Registrar only if the employee works both roles				
	SACR DATA PERMISSIONS					
Security Type			Value			
Instit	tutior	n - Grant a user access to an Academic Institution(s	).			
Academic Org - Grant a user access to an Academic Organization(s).						
Spe	ecia	al Considerations or Comments:				
APPROVALS						
<u>lı</u>	n the	e absence of written signature: Please email your	approval	to the appropriate campus party, per your campus' request process.		
St	ude	ent Records - Campus Approval:				
Last Name:			First Name:			
Signature:			Signature Date:			
St	ude	ent Records - Central Approval: (if requir	ed)			
Las	t Naı	me:		First Name:		
Signature:			Signature Date:			

\_\_\_\_\_ First Name: \_

Empl ID: \_\_\_\_

\_\_\_\_\_ Last Name: \_\_\_

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