Claremont McKenna College
Blackbaud Access Request Form

First Name: ___________________ Last Name: ________________ Middle Initial: ______

Extension: ____________________

Office Location: _______________ Department: ________________________________

Date of Hire: ________________

Action requested:

☐ Add access rights  ☐ Delete access rights  ☐ Change existing access rights

Job Title: ________________________________________________________________

Description of RE duties: __________________________________________________

______________________________

Raiser’s Edge Access Levels Requested

☐ Standard Department Access: This is generally for full time staff whose usage of the system will reflect the security level set up for the department that they will work in.

☐ Special Access: To gain special access the person needs approval from the VP of Development along with an explanation of duties that require special access.

☐ Temporary Employee Access: This access level needs approval from the department manager to be put into a set department group.

☐ Read Only Access: This level allows the end user to look up records and run queries. (This is the group, for example, that non-development and non-President’s staff are in.)

☐ Other: ____________________________________________________________________
Blackbaud NetCommunity Access Levels Requested:

List relevant sites, and specify if you are seeking editing access in Blackbaud NetCommunity.

Editor Access to NetCommunity Level: Reviews site content, Suggests new content and changes to site, Edits site content

☐ Standard Department Access
☐ Special Access
☐ Temporary Employee Access
☐ Read Only Access
☐ None
☐ Other: ______________________________________

Understanding of User Responsibility:

Confidentiality:
I understand that the data contained in the Blackbaud System must be held in strict confidence and must not be shared with any individual or group of individuals—on- or off-campus—who do not have an express business reason to receive such data.

Password Protection:
I agree that I will never share my password with any individual. I further agree that I will report to ITS as soon as possible if I believe my password has been compromised or used without my permission.

Conclusion:
I understand that access to the Raiser’s Edge/Blackbaud NetCommunity System is granted for the purpose of conducting official CMC business. I further understand that failure to abide by these rules is serious, may be cause to revoke my access to the Blackbaud System and may be grounds for disciplinary action. Finally, I understand that I am required to report any actions by others that I observe which I believe may represent security violations.

User Signature: ____________________________ Date: _______________

Name of Supervisor (print)  Supervisor’s signature (or attach proof of approval)  Date: ____________________________

Supervisor Comments: __________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Rev 04 April 14, 2008
<table>
<thead>
<tr>
<th>ITS Comments</th>
<th>Date Completed</th>
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<tbody>
<tr>
<td>Training in Blackbaud:</td>
<td></td>
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<tr>
<td>Documentation received:</td>
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<td>Access Request received:</td>
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<td>Access completed:</td>
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<td>Request Denied:</td>
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