

# REQUEST FOR ACCESS TO THE UTBI DATA CUBES

Use this form to request access to data on the University of Toronto Business Intelligence Portal

**CONFIDENTIAL** when completed

## INSTRUCTIONS

- i. Please print all information using a ball-point or felt-tip pen.
- ii. Complete applicable sections
- iii. Send the original or fax a copy to the address shown on the right
- iv. Please keep a copy for your records

**Enterprise Applications and Solutions  
Integration**

**215 Huron St., 5<sup>th</sup> Floor**

**Please scan and email requests to:**

**EASI Mail Box: [access.easi@utoronto.ca](mailto:access.easi@utoronto.ca)**

## 1. Complete the following information to identify yourself

Name:

\_\_\_\_\_ *Last name (Please print)*

\_\_\_\_\_ *First name*

\_\_\_\_\_ *Initial*

Job Title \_\_\_\_\_

UTORid \_\_\_\_\_

Faculty \_\_\_\_\_

Department: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## 2. USER PROFILE: Indicate the Subject Areas you require

**Note:** Access to some subject areas may require approval from the business owner.

### Subject area:

Admissions

Student Housing

Research

Course Enrolment

Student Income

Program Enrolment

Enrolment Planning

Program Performance Insight

## 3. CONFIDENTIALITY STATEMENT AND USER SIGNATURE

***I understand and agree that the information/data I have been authorized to access is considered CONFIDENTIAL. Under no circumstances will such information available to me be used, conveyed or discussed by me, unless required in the performance of my duties. Failure to comply with this requirement may result in denial of access and other disciplinary action.***

### **SECURITY REQUIREMENTS:**

- ✗ **Keep your password confidential.**
- ✗ **Never use someone else's password.**
- ✗ **Never share your password with someone else.**

\_\_\_\_\_  
*Your signature*

\_\_\_\_\_  
*Date*

## 4. AUTHORIZATION: Obtain your Department Head's signature of approval

\_\_\_\_\_  
*Department Head's Name (Please print)*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Univ. Tel.#*

\_\_\_\_\_  
*Department Head's Signature*