

**West Virginia University
DegreeWorks Production Exceptions Request Form**

Account Change: **Add Exceptions Access** **Delete Exceptions Access**

Requestor Name: _____ Date: _____

Requestor WVUID: _____ Requestor MyID: _____

College: _____ Department: _____

Building Name & Room Number: _____

Phone: _____ Email: _____

Purpose of Access: _____

Statement of Responsibility:

I understand that I am responsible for the security of my accounts and passwords. I will not disclose my username and password to any individual under any circumstances. I understand I am being given access to this system for business purposes only. Additionally I understand that my access to the system may involve access to personal or confidential information and that such information is to be used for business purposes only. I understand that any breach of these understandings outlined above may be grounds for disciplinary action, up to and including termination.

Requestor Signature: _____ Date: _____

Assistant/Associate Dean Name: _____ Date: _____

Assistant/Associate Dean Signature: _____

(Approval is contingent upon receiving appropriate training from the Office of University Registrar)

DegreeWorks Administration Only

Comments _____

DegreeWorks Administration Approval: _____ Date: _____

DBA Use Only

Comments _____

DBA Manager Approval _____ Date _____

SQL Login _____ Privileges Assigned _____

Completed By _____ Date Completed _____
