State Board for Educator Certification Terms of Limited Access to Confidential Data School Districts - User Agreement - SBEC-Online

PLEASE TYPE/PRINT CLEARLY (please ensure it is legible)	
Below, complete the information for the designated individual to access SBEC-Online.	
Name: Title	
Telephone: () Fax	x: ()
E-Mail Address:	
I agree to keep confidential all individually identifiable data pertaining to or as part of the process of accessing SBEC Online. These data have been provided to me pursuant to the consent of individual and state and federal law, including the Family Education Rights and Privacy Act of 1974 (FERPA). I agree to abide by these laws.	
I understand that I am responsible for keeping my signon and password confidential and to protect these data, and I will not distribute individual data to any person, except as authorized by the rules, policies, and legal requirements for the entity for whom I am employed or under contract and that do not conflict with the terms of this agreement. I understand that I am responsible for any computer transactions performed as a result of access authorized by use of my signon or password.	
Signature (of individual to use SBEC Online)	Date
Below, the authorized district/school representative is requesting access to SBEC Online for the individual named above:	
District/School Name:	County/District Number:
Authorizing Name (printed):	Telephone: ()
Title:	Fax: ()
E-Mail Address:	
The individual (named in the top half) has the authority to represent capabilities indicated by me below (checked).	nt my organization using SBEC Online for the
Signature (of authorizing Individual)	Date
 General Access Only (view educator credentials, exan Permits - Data Entry/Permit Access Only Permits - Submit Permits/request hardships from SBE Apply/Recommend Educational Aide Certificates Fingerprinting (SB9) – Upload and Update Access Fingerprinting (SB9) – Read Only Access 	-

Please FAX this completed form to: SBEC Online Access at (512) 936-8298.