**IT ACCOUNT ACCESS REQUEST**

This form is to be used to request authorisation to access or monitor an IT Account in accordance with the University’s Standard Operating Procedure for accessing and monitoring University IT Account holder communications and data <http://documents.manchester.ac.uk/DocuInfo.aspx?DocID=16278> . Please ensure that you have read the Procedure prior to completing this form.

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| **SECTION 1** To be completed by the person making the request:Staff IT Accounts – completed by Line Manager or nomineeStudent IT Accounts – completed by Head of School Administration or Director of Faculty Operations or nominee |
| Name of person issuingrequest |  |  |  |
| Job title |  |  |  |
| School/Directorate |  |  |  |
| Date of request |  |  |  |
| Details of the account holder whose data will be accessed: |
| Name |  |  |  |
| Username eg mtsxxxxx |  | Staff or Student ID number (library card) |  |
| State the precise nature of the data to be accessed or monitored. *Consider carefully whether there might be any likely adverse impact of the access/monitoring arrangement eg impact on the relationship of mutual trust, extent of intrusion**into the user’s private life, third parties who may be affected by the arrangement.* |
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| State the business reason why monitoring or access is required. *This* ***must*** *include an explanation of why obtaining**access is a proportionate response.* |
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| Have you considered alternative ways of getting this information? |
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| Has the account holder given consent? ***Any evidence of the consent provided by the account holder, or attempt to gain******consent, must be kept with this form and passed to the IT Authoriser.*** |
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| State the required duration of the proposed activities *eg duration of monitoring or periods requiring**investigation*: |
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| Where access to an email account or pdrive is required, who requires the access? *Access is normally given for 1 week.* |
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Request granted, amended or rejected and reasons for decision:

**SECTION 2** To be completed by the Authorised Person where consent is not obtained from the IT Account holder: Authorised Person for Staff IT Accounts – Director of HR or nominee

Authorised Persons for Student IT Accounts – the Director for the Student Experience or nominee

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| Name of person authorising this request: |  |
| Job title: |  |
| Date authorised or rejected: |  |

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| **SECTION 3** To be completed by the Authorised Person for the IGO ‐ ie the Head of Information Governance or theirnominees |
| Request granted, amended or rejected and reasons for decision: |
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| Name of person authorising thisrequest: |  |
| Job title: |  |
| Date authorised or rejected: |  |

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| **SECTION 4** Authorisation for IT staff to undertake the work: to be completed by the relevant IT Authoriser iethe Chief Information Officer or the IT Risk Manager |
| Request granted, amended or rejected and reasons for decision eg explanation of why the request might not providereliable evidence; cost of obtaining evidence compared to benefit it provides: |
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| Designated Staff who will be accessing the data or undertaking the monitoring (record all staff who are to be involved inthe investigation): |
| Name: | Job title: |
| Name of person authorising thisrequest: |  |
| Job title: |  |
| Date authorised or rejected: |  |

# The completed form must be retained by the IT Authoriser as evidence that the procedure has been properly followed.