SSN Exception form for Purdue Person Search Access

Date:_____ User Name_____

Position Title:_____

Org Unit Name:_____

Campus:_____

Reason SSN access is needed: _____

_____

_____

Is this Temporary?

   Yes   No

If yes, list dates needed:_____

Is there a legal need?

   Yes   No

If yes, attach supporting documentation

 Signature:_____ Date_____
                  (Person receiving access)

Approved:_____ Date_____
                  (Department Head or Director)

Approved:_____ Date_____
                  (Data Steward)

Send completed form to the appropriate Data Steward.

HR Data Steward, Cheryl Gray/KPTC

Student Data Steward, Keith Gehres, HOVD