Request for Argos Account

Please complete this form to request an Argos account. Once completed, sign it and gather the required approval. Send the completed and signed form to Enrollment Management Operations via email to pcash@utk.edu.

Name: __________________________________________________ Request Date: ___________
   (Last    First    Middle    Suffix)
NetID: ____________ Email: _____________________________ Phone: ______________________
UT Position/Job Title: __________________________________________________________________
College: _________________________________________ Dept: ____________________________

Please enter the colleges and departments for which the requester is authorized to view related data. This information is required for granting access.

<table>
<thead>
<tr>
<th>College</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: 12 - College of Arts &amp; Sciences</td>
<td>Example: 114 - Chemistry</td>
</tr>
</tbody>
</table>

Please enter any specific folders, datablocks, reports or the Argos Academic Reporting Portal (ARP) for which the requester needs to be granted viewer access.

<table>
<thead>
<tr>
<th>Office Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>College</td>
</tr>
<tr>
<td>Department</td>
</tr>
</tbody>
</table>

☐ Check this box if the requester requires developer level access.

Please provide an explanation of how the requester intends to use Argos and the related data. Access is granted based on an acceptable explanation and the requester’s job function or role within the University.
__________________________________________________________
__________________________________________________________
__________________________________________________________

☐ By checking this box, I confirm that I have completed all FERPA training as required by the University.

Signature: __________________________________________ Date: ______________________

Approval Required by a Dean, Director, or Department Head

Approved by: __________________________ Title: __________________________

Signature: __________________________________________ Date: ______________________

Revised 01/15/2021