FSCJ Florida State College at Jacksonville

Campus Solutions Security Access Request Form

Last Name   First Name   EMPL ID

Job Title   Department   Supervisor

1. List your job functions that are specific to this security request:

    _____

    _____

    _____

    _____

2. If applicable, please list an employee your security should mirror:

    _____

*Users must complete appropriate training before access will be granted. For information on required training, please reach out to Steven Gunter.

Employee Signature   Print Name   Date

By my signature, I certify that the above information is correct and I understand that it is my responsibility to review with the above named employee the access they will be granted, the confidential nature of the information contained in this access, and the consequences of violating confidentiality.

Supervisor Signature   Print Name   Date

Please submit Service Request, and attach this form:
1. Go to help.fscj.edu
2. Select The "Student Records" box at the bottom of the page
(You may have to select "more portals" at the bottom)
3. Click "Other student records issues or questions"
4. Add "Campus Solutions Security Access Request" in the Summary box
5. Attach the completed request form
6. Press "Send"