

# AAUDE Data Warehouse Signature and Approval Form

**Signature Section:** To be completed by the person seeking warehouse access.

Please **initial** each box to indicate you understand the statement.

- I have read and understand AAUDE's confidentiality and data sharing policies.
- I agree to abide by all confidentiality and data sharing rules described in the 'Confidentiality and Data Sharing Policies' and specific to individual exchange items concerning how AAUDE data may be reported and disseminated.
- I agree not to share my login information with anyone.
- I understand that failure to abide by these rules could result in loss of access to these data either for me or for my institution and that my institution may be notified of any inappropriate use.

Please **fill-in** this section legibly and return the form to the primary AAUDE representative at your institution.

*Institution* \_\_\_\_\_  
*Name (printed)* \_\_\_\_\_  
*Title* \_\_\_\_\_  
*Mailing address* \_\_\_\_\_  
\_\_\_\_\_  
*City, State, Zip* \_\_\_\_\_  
*Phone number* \_\_\_\_\_  
*Email address* \_\_\_\_\_

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature*

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**Approval Section:** To be completed by the primary AAUDE Representative at the institution.

I approve \_\_\_\_\_ to receive a login to access the AAUDE warehouse. Please establish an account that provides him/her with access to the following warehouse role (*check only one*).

- \_\_\_\_ **Basic without faculty salaries** (includes all data in warehouse except survey data and faculty salaries)
- \_\_\_\_ **Basic with faculty salaries** (includes all data in warehouse except survey data)
- \_\_\_\_ **Faculty Salaries only**
- \_\_\_\_ **Grad School** (includes Delaware, Profile by CIP, Grad Stipends, IPEDS Completions, and NSF R&D)
- \_\_\_\_ **Faculty Profile** (includes Faculty Profile by CIP and IPEDS HR)

Also provide this individual with access to the following response-level survey data (*check all that apply*).

- \_\_\_\_ **All response-level survey data**
- \_\_\_\_ **Faculty survey**
- \_\_\_\_ **Doctoral exit survey**
- \_\_\_\_ **Undergraduate exit survey (aka Senior survey)**
- \_\_\_\_ **Alumni survey**

In addition to the warehouse access, please add this individual with to the AAUDE listserv.

- \_\_\_\_ **Yes, add to listserv**

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature (Primary AAUDE Representative)*

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When both sections are complete, send this page to Rebecca Carr at 208 Canfield Administration Bldg, Lincoln, NE 68588-0420 or fax it to her attention at 402-472-4929. The login information will be sent through US Mail after this signature/approval page has been received and processed.