California Student Aid Commission

WebGrants System Administrator's Access Request

DO NOT include or send this informational page with Administrator Access Form

Informational / Instructions for System Administrator's Request Form

The request form is required for each School's WebGrants System Administrator (SA).
The forms must be approved by the Authorized Official (AO) and returned to the Commission.

Section 1. Institution / School Section: (Required for access)

- Select type of school access you are requesting by choosing the correct box.
- Required fields are: Institution / School Name, OPE ID / College Board Code, School Address, City, State, Zip code.
- High schools require separate Security request form for each additional school added (if Authorized Official is different).
- Authorized Officials being: Principal, Dean, President, Head Master.
- The Authorized Official (AO) and System Administrator (SA) cannot be the same person. The (AO) will not have WG access.

Section 2. Personal Information Section: (Required for access)

- Initial that you have read and understand the security of PII while using the WebGrants system.
- Select / Check the appropriate check box based on the type of action the Commission should complete.
  - **New** – Requester has never had account with CSAC. Or requesting additional school to existing admin account.
  - **Renew** – Used to regain access with existing account. High Schools expire 2 years from creation/renewal. Colleges expire every year from creation/renewal. On-site USER accounts expire with System Administrator accounts.
  - **Change** – Is used for: Changed schools, Add or Remove School, changing to or from a user/admin account.
  - **Disable** – Disable access to WebGrants. (e.g. left school, retired.) Authorized Official signature required.
- Enter (SA) First, Last name, Middle Initial of the System Administrator (SA) requesting access.
- Enter email issued by school and not shared by other employees. 3rd party emails are. (e.g. gmail, yahoo are not authorized.)
- The requesting System Administrator must provide a unique answer to the selected question. Three answers are allowed.
  - The answer must be at least 5 to 20 characters. (no spaces) (e.g. 1965Mustang, CheeseCake)
  - When calling you will provide Security Answer and OPE ID / College Board Code for assistance.
- This form may be used for USER accounts. System Administrator will retain the USER signed form on-site.
- Information Security and Confidentiality Agreement signed by (SA) and (AO) are required with System Administrator Access Request.
- USER ID, Passwords and Security Answers are NOT to be shared with other employees.
- CSAC IT Service Desk are the System Administrators for School Administrators in WebGrants.

Section 3. Authorized Official Approval for WebGrants Access: (Required for access)

- Authorized Official (AO) designates:
  - Two (2) WebGrants System Administrators for Institutions or High Schools.
  - Three (3) for District / County accounts.
- The Authorized Official (AO) cannot have an active user account in WebGrants system.
- System Administrator's are the Authorized Official for on-site USER account access.
- Type Full Name, Title, Phone Number, fax number (optional) and personal institution e-mail address, signature and date.
- Authorized Official email is required for processing electronically.

Security and Confidentiality Form

- High Schools are required to submit a Security Form for each school submitting access to.
- The System Administrator (SA) and Authorized Official (AO) must read and sign the Security and Confidentiality form.
- The Authorized Official and the individual requesting System Administrator access **MAY NOT BE** the same individual.

WebGrants Admin:

- School Support: 1-888-294-0153 / schoolsupport@csac.ca.gov
- Password Reset: 1-888-294-0148 / csacitservicedesk@csac.ca.gov

For Students:

- Student Support: 1-888-224-7268 / studentsupport@csac.ca.gov

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All fields are required to obtain a System Administrator's (SA) User ID and Password. WebGrants Information Security and Confidentiality Agreement must be attached and submitted to the California Student Aid Commission prior to gaining access to the Webgrants system.

Section 1 - Institution / School Information

(All fields required to process)

Select School Type: **(High Schools expire 2 years from creation / renewal) (Colleges expire every year from creation / renewal)**

◯ High School	◯ 2/4 Year College	◯ CSU-UC	◯ Community / Jr. College
◯ District	◯ County	◯ Cal-SOAP	Consortium
◯ USER Only	◯ SB70 ONLY	◯ OTHER:	

Institution / School Name:	**OPE ID / College Board Code:**		
Institution / School Address:	**City:**	**State:**	**Zip Code:**

As the System Administrator (SA), I certify that I have received and reviewed all security and confidentiality policies and annual training pertaining to the use of the Commission's WebGrants systems and data. **INITIAL-**

Section 2 - Personal Information

NOTE: Old System Admins may have to be disabled to create new account.

New ◯ **Renew** ◯ **Change** ◯ **to:** Select DropDown ---> **DISABLE ACCOUNT** ☐ Disable Administrator account

System Administrator (SA) Printed Name:	**E-Mail Address** *(maximum of 40 characters)*	**Phone Number**	**Date**

Password Reset Questions:	**Answers:**
◯ Your pets name & type (e.g., MaxxCat)	
◯ Your favorite food to eat (e.g., CarrotCake)	
◯ Year & Model of your first car (e.g., 67Camaro)	

Section 3 - Authorized Official Approval

NOTE: The School's (AO) and (SA) may not be the same person.

The System Administrator account is created and renewed annually from submission date. The WebGrants Security and Confidentiality Agreement must be signed by both Authorized Official and System Administrator then submitted to the Commission. These may not be the same person. The Authorized Official is not authorized to access WebGrants.

**** As the Authorized Official I certify that I have designated the above-named employee as the WebGrants System Administrator and that I have reviewed all security and confidentiality policies pertaining to the use of WebGrants.***

Authorized Official (AO) Typed Full Name / Title	**E-Mail Address** *(maximum of 40 characters)*	**Phone Number**	**Date**

Email or Fax forms to:

WEBGRANTSACCESS@CSAC.CA.GOV
Allow 24 - 48 hours to process

California Student Aid Commission
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Information Security and Confidentiality Agreement is required by the California Student Aid Commission (Commission) from any person or entity (high school, post-secondary educational institution, agent, program, or 3rd party) requesting access to a Commission information technology system.

Information Security and Confidentiality Agreement:

The California Student Aid Commission (Commission) is committed to protecting the confidentiality and security of information. As an individual requesting access to a Commission application, database, or information technology system, during my duties or purpose at the Commission, I may have access to proprietary or confidential information.

I understand that all proprietary and personally identifiable information (collectively PII) must be maintained confidentially, and in a secure fashion.

I agree to follow all Commission policies and procedures governing the confidentiality and security of PII in any form, including oral, fax, photographic, written, or electronic. I will regard both confidentiality and security as a duty and responsibility while part of the Commission workforce, or during my involvement with Commission as a non-workforce member.

I agree that I will not access, release, or share PII, except as necessary to complete my duties or purpose at the Commission. I understand that I may not access any information on friends or family members unless a Release of Information form authorizes me to do so, unless doing so is a necessary part of my job duties, or unless I am otherwise permitted to do so by Commission policies. I understand that I am not authorized to use or release PII to anyone who is not part of the Commission workforce or an approved visiting observer or Commissioner except as provided in Commission policies and procedures, contract, or as required by law.

I agree that I will use all reasonable means to protect the security of PII in my control, and to prevent it from being accessed or released, except as permitted by law. I will use only the access privileges I have been authorized to use, and will not reveal any of my passwords, user account identifiers (IDs), or share access with others. I will take precautions to avoid inadvertently revealing PII; for example, I will use workstations in a safe manner and will make reasonable efforts to prevent conversations from being overheard, including speaking in lowered tones and not discussing PII in public areas. If I keep Commission related data and notes on a hand held or laptop computer or other electronic device, I will ensure that my supervisor knows of and has approved such use and I will keep this information secure and confidential. If, as part of my responsibility, I must take PII off the premises, I will do so only with permission from my supervisor; I will protect PII from disclosure; and will ensure that the PII is either returned to Commission or destroyed.

I agree that when my employment, affiliation, visitation or assignment with Commission ends, I will not take any PII with me and I will not reveal any PII that I had access to as a result of my duties at the Commission. I will either return PII to the Commission or destroy it in a manner that renders it unreadable, unusable by anyone else and in accordance with Commission security and confidential destruct policy.

I agree to report unauthorized use or disclosure of PII or security issues affecting systems that contain or give access to PII, to the California Student Aid Commission Information Security Office, P.O. Box 419026 Rancho Cordova, CA 95741; Email: iso@csac.ca.gov and csacitservicedesk@csac.ca.gov, IT Service Desk: 888-294-0148 Fax 916-464-6430.

I understand that access to all Commission systems is monitored. There is no reasonable expectation of privacy expressed or implied in my usage of Commission information systems. My usage of all Commission systems will comply with all federal and California information security and confidentiality laws, including the Comprehensive Computer Data Access and Fraud Act (California Penal Code Section 502), Federal Privacy Act, Gramm-Leach-Bliley Act with subsequent "Privacy" and "Safeguards" rulings, the Information Practices Act of 1977, as amended and the Commission's security and confidentiality policies and procedures. All unauthorized access is prohibited.

I understand that if I do not keep PII confidential, or if I allow or participate in inappropriate disclosure or access to PII, I will be subject to immediate disciplinary or corrective action, up to and including dismissal or loss of access privileges to Commission property and facilities. I understand that unauthorized access, use, or disclosure of PII may also violate federal and state law and may result in criminal and civil penalties.

This agreement will remain in full force and effect until it is either rescinded or the requestor's duties or relationship with the commission are changed or terminated. Non-compliance with this agreement may result in adverse action including possible termination of employment, contract, agreement and/or criminal and civil penalties under local, state, and federal laws.

System Administrator (SA) Printed Name:	**Title:**	**OPE ID / College Board Code:**	**User ID:**
Institution / School Address:	**City:**	**State:**	**Zip Code:**
E-Mail Address: *(max. of 40 characters)*		**Phone Number:**	

By signing below, I certify that I have received, reviewed, and understand the Information Security and Confidentiality policies of the California Student Aid Commission (CSAC). I will comply with these policies while using any Commission information system.

(Requesting System Administrator) Signature: (Click on box below to esign)	**Name/Title:**	**Date:**
(AO) Signature:	**Name/Title:**	**Date:**

HOW TO SIGN

Reset Form

California Student Aid Commission

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Additional list of Schools in your District/County

Institution / School Name	OPE ID College Board Code	Institution / School Address
	Primary Code:	

Attach additional pages, if necessary

Print