

Remote Access Agreement

2018-2019 School Year

User Information

District Name: _____

Telephone Number: _____

Date of Request: _____

Purpose of Access: Use of Migrant Education Program Student Database

Duration of Agreement: **July 1, 2018 – June 30, 2019**

(Not to exceed 365 days)

Please check the appropriate boxes below:

Federal Programs Director:

Employee

Contractor

Other: _____

Records Manager:

Employee

Contractor

Other: _____

Assurance Agreement

By signing on the line below, you are agreeing:

- To safeguard the security of any password provided to you by system administrators.
- Not to share the system access you have been given.
- That you will not perform actions on Alaska Department of Education & Early Development Information Technology resources which are inconsistent with the spirit of this agreement, violate any State or Federal law or result in system instability.
- That any computer you will use to access the Migrant Education Program Student Database is protected by Anti-Virus with current updates and is free of any malicious code or applications (E.G., virus, Trojans, worms, key loggers, back doors, etc).
- If the computer you use is a laptop, the laptop will have encryption software installed.

District Federal Program Director

Migrant Education Records Manager

Printed Name

Printed Name

Signature

Signature

Date

Date

The State of Alaska reserves the right to rescind this agreement at any time without prior notification.

Please return forms by **August 15, 2018** to:

Jannessa Luerra

Email: Jannessa.luerra@alaska.gov

Phone: 465-8231

Form #05-16-002

Alaska Department of Education & Early Development