

## Access to department system: **TCSI Data Extracts**

Please email completed form to:

	@dese.gov.au
Request to:   Create new user account   Delete user account	
Client details Given name: Surname:	
Phone no: Email address	s:
HITS   TCSI 4 digit code (if known): Organisation:	
Australian Bu	siness Number (ABN):
Roles and description	
Data Administration	
☐ TCSI Data Extracts	
Access to TCSI Analytics is via PRODA – see the <u>TCSI Access page</u>	2
Staff with current active HEIMS access do not need to complete	this form to request and retrieve TCSI data extracts.
Please use the <u>HEIMS access form</u> if you require access to any o	f the following:
<ul> <li>Higher Education estimates and payments</li> <li>IPI institution payment reports</li> </ul>	
Legacy data in HEIMS online	
Applicant Declaration	Institution Authorisation (all fields are required)
I have read and agree to the Terms and Conditions for access to	Manager/Supervisor name:
TCSI data extracts.	Phone no:
Applicant's signature:	Manager/Supervisor's signature:
×	_×
Date:	Date:

## Terms and Conditions for access to TCSI data extracts

## **Privacy Obligations**

Individual credentials are issued to enable access to department system environments as specified on this form. Users are required to securely manage access to these environments.

Personal information must be properly handled in accordance with relevant privacy requirements under the *Higher Education Support Act 2003, VET Student Loans Act 2016, Tertiary Education Quality and Standards Agency Act 2011* and the <u>Privacy Act 1988</u>.

Each officer is accountable for all actions undertaken using their logon IDs / passwords.

If the user, or any third-party for which the user is responsible, breaches any part of the terms for the issuing of production credentials, then the department may, at its sole discretion, withdraw or restrict system access.

Certification
I certify that:
$\Box$ I must comply with the Australian Privacy Principles in the <u>Privacy Act 1988</u> and ensure suitable security arrangements exist for all records containing personal information.
$\Box$ I am responsible for ensuring my access is terminated within 24 hours when my work commitments no longer require this access.
$\Box$ As an intended user of TCSI data extracts, I certify that I have read and agree to these terms and conditions for access to the department data systems.
Applicant's signature:
Date:
Departmental use only (TCSI Data Collections)
Manager:
Signature:
Date: