

## Request to access SCRIPT database

**Curtin**   
University of Technology  
Office of Research and Development  
GPO Box U1987  
Western Australia 6845  
(T) 9266 7863 (F) 9266-3793

Family name: \_\_\_\_\_ Given name: \_\_\_\_\_  
Email: \_\_\_\_\_@curtin.edu.au Ext. no: \_\_\_\_\_  
Position title: \_\_\_\_\_ Staff/Student ID: \_\_\_\_\_  
Campus/site: \_\_\_\_\_ Dept/area: \_\_\_\_\_  
(e.g. Bentley, Muresk, Tech Park etc)

SCRIPT ACCESS (please tick the function/s you require, and circle the organisational level required – e.g School.)

### **Administrators/Heads of Area:**

- System Administrator (ORD only) (Note: appropriate authorisation is required)
- Manage University (ORD only)/Faculty/School/Area publications
- View University/Faculty/School/Area's contracts
- View University/Faculty/School/Area's research projects (incl. contracts)
- Administer RPI Group: \_\_\_\_\_ Group #: \_\_\_\_\_
- Approve University (ORD only)/Faculty/School/Area Consultancy projects\*
- Approve University (ORD only)/Faculty/School/Area Research projects\*

\* Limited to Heads of Area or proxy authorised by Head of Area

### **Researchers:**

- Manage own publications
- View own research projects (Note: currently limited to trial groups)
- Manage own consultancy projects (Note: Head of Area authorisation is required)
- Participate in RPI

### **Consultancy Coordinators:**

- Consultancy Coordinator for Faculty (Note: appropriate authorisation is required)

### **By signing this order, the user:**

(a) Acknowledges that he/she, as an employee/student of Curtin University, is bound to comply with the ICT Use Policies of the University (<http://policies.curtin.edu.au/>); and

(b) Agrees that the account issued is for their personal use in support of the teaching, research, or administrative functions of the University and may not be used for any other purpose.

(c) Acknowledges he/she has read and fully understands the Confidentiality Agreement.

Signature of User: \_\_\_\_\_ Date : \_\_\_\_\_

### **Authorised officer to Complete:**

Signature of Authorised Officer: \_\_\_\_\_ Date : \_\_\_\_\_

*By signing this form, you agree that the staff member/Student needs access to the relevant application(s), and that you are authorised to approve their access to the organisational level indicated.*

**Please send a copy of this form to the Information Management Officer – (F) 9266-3793**