



**NATIONAL STUDENT CLEARINGHOUSE
SECURE WEB SITE SERVICE AGREEMENT FOR EDUCATIONAL INSTITUTIONS**

*Please complete and return this **two-page** form to the Web Administrator, National Student Clearinghouse, 13454 Sunrise Valley Drive, Suite 300, Herndon, VA 20171. Fax (703) 742-4239.*

Complete this document for secured web site access limited to the basic School Participation Agreement.

An educational institution that has entered into a basic school Participation Agreement with the Clearinghouse is eligible to use its secure web services. This Secure Web Site Service Agreement allows authorized users at your school to review all student enrollment data supplied by your school and to manage your Clearinghouse relationship. It also allows you to use LoanLocator to obtain access to your students' loan data maintained by lenders, servicers, and other participants in the Federal student loan programs. This type of access is generally granted to registrar and financial aid personnel who have a legitimate educational interest in this information in accordance with the institution's own policies and procedures. **Both the user and an authorized school official are required to sign this Agreement.**

Please add/change/delete access for the following user:

| Name | Telephone Number | E-mail address |
|--------------|--------------------------|---------------------------|
| | | |
| Title | Requested User ID | Requested Password |
| | | |

User ID may be no more than 9 characters. The password may range from 4 to 20 characters.

This user no longer requires access to the secure portion of the web site.

I agree that I will not allow anyone else to use my user name and password or otherwise obtain access to the Clearinghouse database with my user name and password and that I will protect them against inadvertent disclosure. I promise to use web based access to the Clearinghouse database solely for the purpose specified above. I promise that I will log off the Clearinghouse database as soon as I complete my work and that I will not leave my computer unattended while I have web based access to the Clearinghouse database. I am authorized by my institution and in accordance with my official duties to obtain and use this access type.

User Signature _____ **Date** _____
(Not required for deletion of user access)

In order to safeguard the integrity and security of the Clearinghouse student enrollment database, the Educational Institution agrees to comply with the following terms as condition of its use of web services:

1. The Educational Institution agrees to use the Secure Web Site Service Agreement to obtain a user name and password for each individual who obtains access to the Clearinghouse's secure web site under the auspices or on behalf of the Institution ("authorized personnel").

(a) The Educational Institution agrees to take reasonable steps to ensure that authorized personnel do not share their user names and passwords with other individuals or entities.

(b) The Educational Institution agrees to contact the Clearinghouse immediately to cancel the user names and passwords assigned to personnel who are no longer authorized to obtain access to the Clearinghouse's secure web site.

2. The Educational Institution will ensure that authorized personnel use the Clearinghouse's secure web site only for the purposes specified under this Agreement. The Clearinghouse will monitor the use of its secure web site to help ensure that authorized personnel use the site only for the purposes specified under this Agreement.

3. The Educational Institution and all authorized personnel under this Agreement agree to comply with all Federal, State and local requirements pertaining to the security, confidentiality, and privacy of information maintained by the Clearinghouse, including the Federal Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. 1232g, and the Federal Privacy Act, 5 U.S.C. 552a.

4. The Clearinghouse may send a copy of any completed Secure Web Site Service Agreements to the individual who signed the basic School Participation Agreement.

5. This Secure Web Site Service Agreement remains in effect so long as the Educational Institution's basic School Participation Agreement remains in effect.

On behalf of _____, OPED ID# _____,
(Name of Educational Institution)

I authorize the web-based access described in this Agreement. I am a department head, tenured faculty member, or other school official authorized to bind the institution to the terms of this Agreement. I also accept responsibility for training and supervising the user in accordance with the terms of this Agreement.

Signature **Printed Name** **Title** **Date**