

**Center for Educational Performance and Information
MEIS Security Agreement to Access the
Graduation/Dropout Review and Comment (GAD) Application**

Please type or print clearly; otherwise, the processing of your form may be delayed.

Step 1. Please check **only one of the three boxes** below for the permissions being requested:

DISTRICT USER ONLY

Reviewer
View-only access to data.

District Code

ISD Code

District Name

OR

ISD USER ONLY

Reviewer
View-only access to data.

Auditor
View-only access to data and can submit audit findings.

ISD Code

ISD Name

Step 2. Enter the name of the individual the superintendent/PSA chief administrator authorizes to access the GAD Application.

Name

Title

E-mail Address

Phone Number

Step 3. For the authorized individual: If you already have a MEIS account, go to Step 4. If you do not already have a MEIS account number, access the Internet and go to the following URL: www.michigan.gov/meis. Click on the MEIS logo. On the next screen click on "**Create an MEIS Account**" and follow the online instructions.

Step 4. Authorized MEIS Account Number (e.g., A1234567): _____

Authorized MEIS Account Login Name (e.g., smithjan): _____

NOTE: If you are replacing a formerly authorized individual, please download and complete a MEIS Authorized User Removal Request Form. This document can be downloaded at the following link: http://www.michigan.gov/documents/CEPI-MDE_MEISRemovalReqFrm_128431_7.pdf

Step 5. For the individual to be authorized: *Please sign below.*

I agree to abide by the regulations that govern the use of student data within the Family Educational Rights and Privacy Act (FERPA - 34 CFR Part 99), as well as the Privacy Act of 1974, governing records maintained about individuals. A copy of FERPA is available at http://www.michigan.gov/documents/FERPA_34CFR99_119434_7.pdf, and the Privacy Act is available at <http://www.usdoj.gov/foia/privstat.htm>.

By signing this agreement, I agree to protect my user identification and password from unauthorized use. I understand all access under my user ID is my responsibility. I agree to comply with the requirements of FERPA and the Privacy Act of 1974.

Signature of Individual to be Authorized

Date

Step 6. For the superintendent/PSA chief administrator: *Please Sign Below.*

I attest that the above-named individual is authorized by me to view and download education data reports at the appropriate level as indicated above.

Name of District/Agency

Date

Signature of Superintendent/PSA Chief Administrator

Name and Title

Step 7. Fax this form to CEPI: (517) 335-0488
Send questions to: cepi@michigan.gov