

## Yukon's Student Information System (Aspen) Acceptable Use Agreement

Confidentiality and protection of privacy are of critical importance when accessing electronic information systems that contain personal information. Yukon's Student Information System (Aspen) permits user groups, including teachers, counselors, administrators, administrative assistants and department staff, to access a broad range of information on Yukon students for purposes specifically related to their roles in the education system.

The purpose of this agreement is to help ensure authorized users are aware of their legal obligation to protect the privacy of individuals and confidentiality of personal information contained within the system as required by Yukon's *Access to Information & Protection of Privacy Act* (ATIPP) and the Yukon's Education Act. All Aspen SIS users are expected to follow the security guidelines listed below.

- 1. Users will only access Aspen using their assigned username and password.
- 2. Users must not share their password with anyone.
- 3. Users must lock their Aspen screen or log out of Aspen before leaving their computer station. When accessing Aspen from a location other than the Yukon government's secure networks (YNet or YESNet), Aspen users must ensure they have successfully logged out of the system.
- 4. Users must ensure that information displayed on an active Aspen screen is only viewable by the authorized user.
- 5. Aspen data may only be disclosed to users authorized to access the same data.
- 6. No Aspen data will be disclosed to outside agencies or third parties without the written consent of the child's parents/guardians or from the student, if 19 years of age or older.
- 7. All Aspen data, online or printed, must be treated as confidential information as required by the ATIPP Act. Great care must be taken when printing any documents from Aspen, as it is no longer secured by the system.
- 8. Loss or misuse of personal information must be reported immediately to the Department of Education's Privacy Management Coordinator at 667.8326 and the school principal.

## DECLARATION OF UNDERSTANDING AND ADHERENCE

have read and understand the information contained in this agreement and I agree to abide by thes
erms.

Name:	School/Facility:	
Signature:	Date:	