RIT Finance & Administration
DATA STEWARD APPOINTMENT FORM

Section I – Action Requested (*Please select one or both)*

Department: _____

☐ Appoint Primary Department Data Steward

☐ Appoint Secondary Department Data Steward

Section II – Data Steward Information

Primary Data Steward

Name (First, Last): _____

RIT Email: _____ RIT Phone #: _____

Secondary Data Steward

Name (First, Last): _____

RIT Email: _____ RIT Phone #: _____

List Shares above Data Steward(s) will have authority over (i.e. DEPT_sharename):

_____ _____

_____ _____

_____ _____

_____ _____

I will comply with the policies and responsibilities outlined by FAST in regards to the duties of a Data Steward. I hereby authorize the changes denoted by this document to be performed.

Print Primary Data Steward's Name	Primary Data Steward's Signature	Date
Print Secondary Data Steward's Name	Secondary Data Steward's Signature	Date

Section III – Authorization

I approve the assignment of Data Steward Responsibilities to the requester(s):

Print Department Head's Name	Department Head's Signature	Date

Send completed form to FAST Technical Support, Building 30 Room A-106 or by fax to 475-3870

Section IV – Official Use Only (Do not write below this line)

I have performed the aforementioned requests:

Print FAST Administrator's Name	FAST Administrator's Signature	Date

RIT CONFIDENTIAL