## AUSTIN PEAY STATE UNIVERSITY POLICIES AND PROCEDURES MANUAL

| Policy Number: 4:027                         | Supersedes Policy Number: VII:02:01 |  |
|----------------------------------------------|-------------------------------------|--|
| Date: 7/11/02                                | Dated: August 1, 1986               |  |
| Subject: OPENVMS Academic Timesharing System |                                     |  |
| Initiating Authority: Vice President for     | TBR Policy/Guideline Reference:     |  |
| Finance and Administration                   | 9                                   |  |
| Approved:                                    |                                     |  |
| , lety offer                                 | President:                          |  |

- 1. Austin Peay State University faculty and staff members, properly authorized Austin Peay State University students and other persons approved by the Office of Information Technology may use this System.
- 2. This System is primarily reserved for the purposes of academic computing and faculty research.
- 3. Any student use of the System must have the approval of a faculty member. This faculty member will be responsible for properly informing the student of the policies concerning the use of this System and for instructing the student in its use.
- 4. Any faculty use of the System must have the approval of the faculty member's departmental chairperson and dean.
- 5. Any staff use of the System must have the approval of the staff member's department head.
- 6. Student accounts on the System will be issued upon completion of a STUDENT ACCOUNT APPLICATION (PPM FORM 4:027:a). This form must be signed by the applicant.
- 7. Faculty and staff accounts will be issued upon completion of a FACULTY AND STAFF ACCOUNT APPLICATION (PPM FORM 4:027:b). This form must be signed by the applicant, the departmental chairperson- (Staff accounts need only user and department head's signatures.)
- 8. All accounts on the System must have the approval of the Director of Information Technology or his designated representative. An appeal of disapproval on an

account may be made to the Office of Information Technology whose decision shall be final.

9. All users will adhere to policies set forth in the REGULATIONS FOR THE USE OF THE OPENVMS TIMESHARING SYSTEM.

## REGULATIONS FOR THE USE OF THE OPENVMS ACADEMIC TIMESHARING SYSTEM

It is important for all Austin Peay State University OPENVMS users to practice ethical behavior in their computing activities. Irresponsible actions by any user may disrupt all other users' work. The Office of Information Technology has the responsibility of securing its computing system to a reasonable degree against unauthorized access while making it accessible for legitimate users. This responsibility includes informing users of expected standards of conduct and the punitive measures for not adhering to them.

The list below constitutes the REGULATIONS for the use of the ALPHASERVER:

- 1. Users must use only those accounts that have been authorized for their use.
- 2. Users are responsible for the usage of their computer accounts. No user should divulge the USERNAME or PASSWORD to his account to another person.
- 3. Users must use their accounts only for the purposes and in the class for which they were authorized.
- 4. Approval of the Director of Information Technology is required for the use of the ALPHASERVER SYSTEM for any task that is not directly related to APSU either through regular class assignments or research being conducted by students or faculty of APSU.
- Users must not access, type, print, or copy the programs or data belonging to other users unless they have prior appropriate authorization to do so. Users should not attempt to access files for which they do not have authorization.
- 6. Users must not misuse, damage or misappropriate in any manner computing equipment, property, and other facilities and resources.

## **DISCIPLINARY ACTION**

Disciplinary action for violating the above regulations shall be governed by the applicable provisions of student handbooks, faculty and staff handbooks, and personnel policy manuals for Austin Peay State University. The following disciplinary sanctions

outline some, but not all, of the actions that may be taken by Austin Peay State University against violators of the regulations:

- 1. Restitution to the University for damage to or misuse of computing facilities.
- 2. Reprimand in writing indicating further violation may result in more serious penalties.
- 3. Restriction of computing privileges for a specified period of time.
- 4. Suspension of the individual from the institution.

Unauthorized use of computing resources may be adjudged a felony and the individual(s) involved may be subject to legal prosecution.

## FACULTY AND STAFF ACCOUNT APPLICATION

| r | Name:                                                                                | Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|---|--------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|   | Check One: ( ) New Account ( )                                                       | Replacement Account                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|   | Dept. Account No.:                                                                   | Dept.:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|   | Purpose:                                                                             | <u>8</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|   | Expiration Date:                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   | System Manager requests that 9 or 1 as the USERNAME. The PASSWORD can                | required in order to log onto the VAX. approval of the VAX System Manager. The ess characters of your last name be used be any string of 9 or less alphanumeric TORD below should be remembered by the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|   | USERNAME:                                                                            | PASSWORD:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|   | USERNAME and PASSWORD? ( ) YES ( $(1)$ Will you change the PASSWORD at               | a class of students are given the ) NO If YES: the end of each quarter? ( )YES ( )NO ger to change the PASSWORD? ( )YES ( )NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 7 |                                                                                      | , will anyone else besides you and the ME and PASSWORD? ( ) YES ( ) NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|   | (Contact the VAX System Manager                                                      | when the above list needs updating.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 5 | I have read the Regulations for the                                                  | Use of the VAX/VMS Academic Timesharing se regulations while using this System.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   |                                                                                      | User Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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|   |                                                                                      | Dept. Chairperson Signature (faculty) Dept. Head Signature (staff)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| _ |                                                                                      | Dean Signature (faculty only)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
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|   | DEVICE: DCL LGICMD: DIRECTORY:                                                       | LOGIN FLAGS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
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| _ | RIVILEGES: TMPMBX                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|   | ILE PROTECTION: RWED (SYSTEM) RWEI                                                   | The state of the s |
| A | PSU/EXAP/CC/017 (8-81) Revised                                                       | PPM FORM 4:027:b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |