



OUR AGENDA



- Who's Who
- UCF Systems
- Important Policies to Know
- Why This Is Important to
 - You



WHO'S WHO

UCF

- University President
- Provost and Administration
 - Vice Presidents
- Colleges
- Academic Success Coaches
- Faculty
- Administrators/Staff
 - Dean of Students
 - Ombuds Office
 - Student Care Services
 - First Year Experience





S UCF

myUCF Menu

- Academic Resources
- Staff Applications
- Student Self Service
- Employee Self Service
- Manager Self Service
- Faculty/Advisor Self Service
- My Content
- Reporting Tools

Change my NID Password

Knights Email

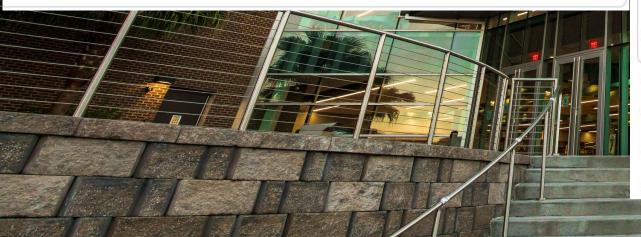
Webcourses@UCF

UCF Home Page

UCF COM Home Page

UCF Company Directory

My Preferences





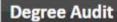
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Mobile Version



- About Me (Names, Addresses, Phone Numbers, Email Addresses, Emergency Contacts, Ethnicity, FERPA Restrictions, UCF Alert, UCFID Info)
- · Holds and To Do List
- Housing Status
- Class Search
- Enrollment (Enrollment Dates, Shopping Cart, Add, Drop, Swap)
- My Academics (My Advisors, My Class Schedule, My Weekly Schedule, View My Grades)
- My Finances (Student Direct Deposit, View Financial Aid, View My Account)

Please use the Give Feedback option within myUCF Mobile to send us your comments. If you have questions or need assistance, please contact the Service Desk at 407-823-5117 or servicedesk@ucf.edu.





myKnightAudit

Interactive progress toward Undergraduate degree program completion



Graduate Plan of Study
Provides a current status report of Graduate program requirements towards graduation















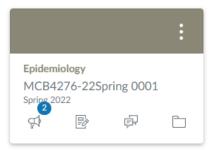




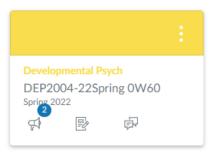




Dashboard

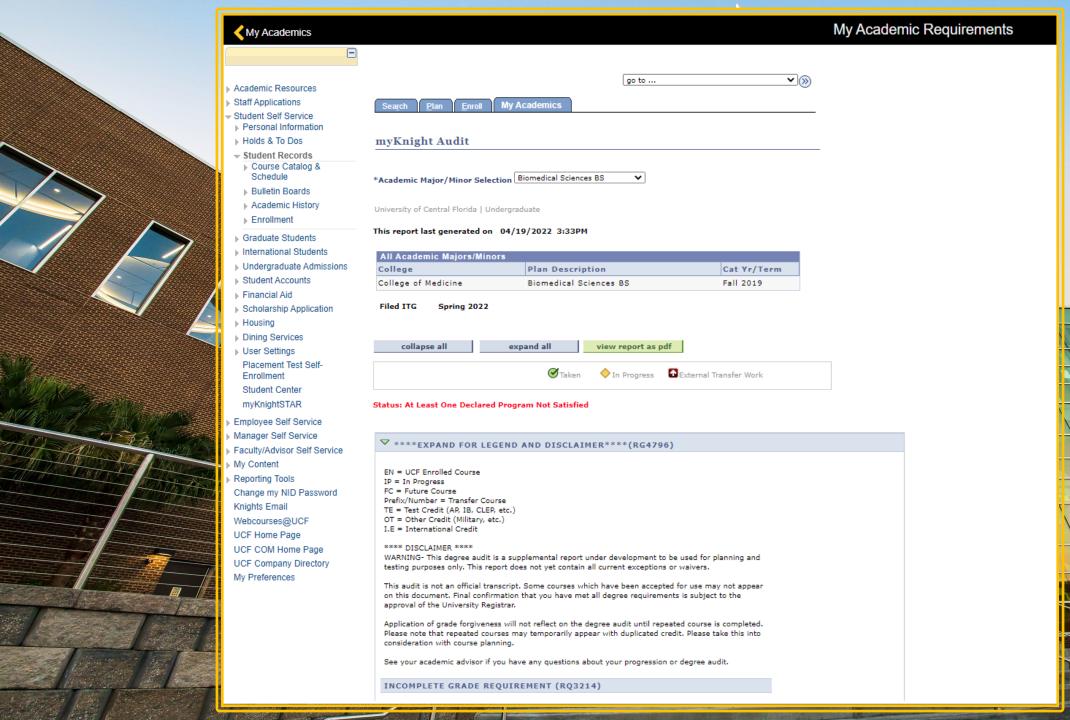


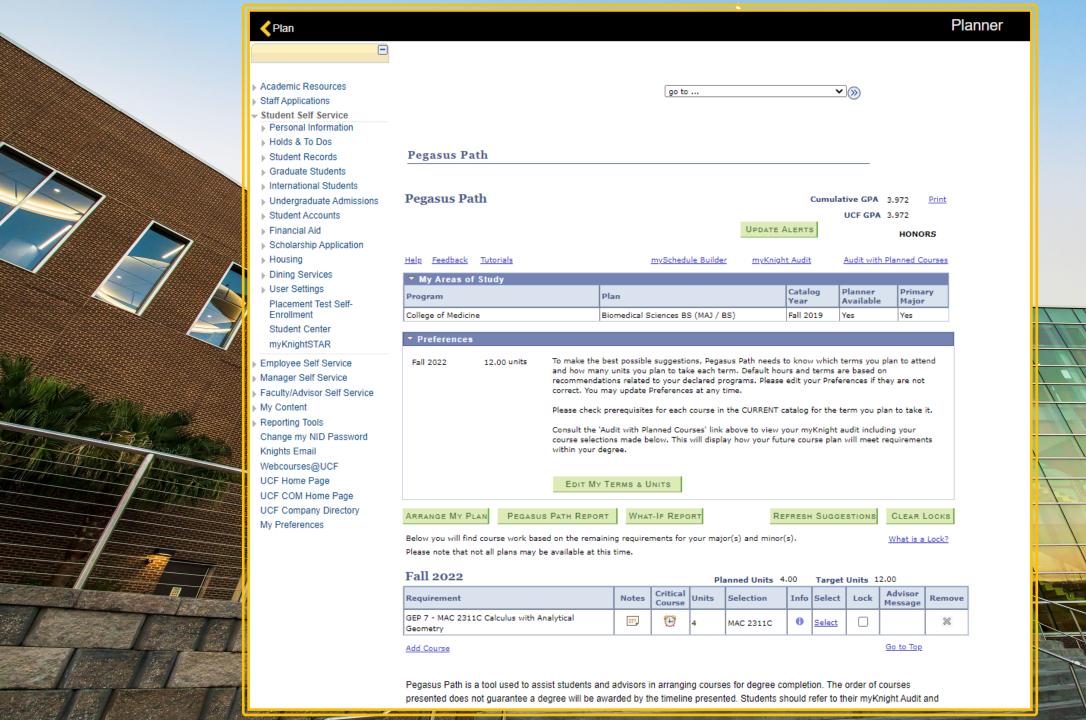










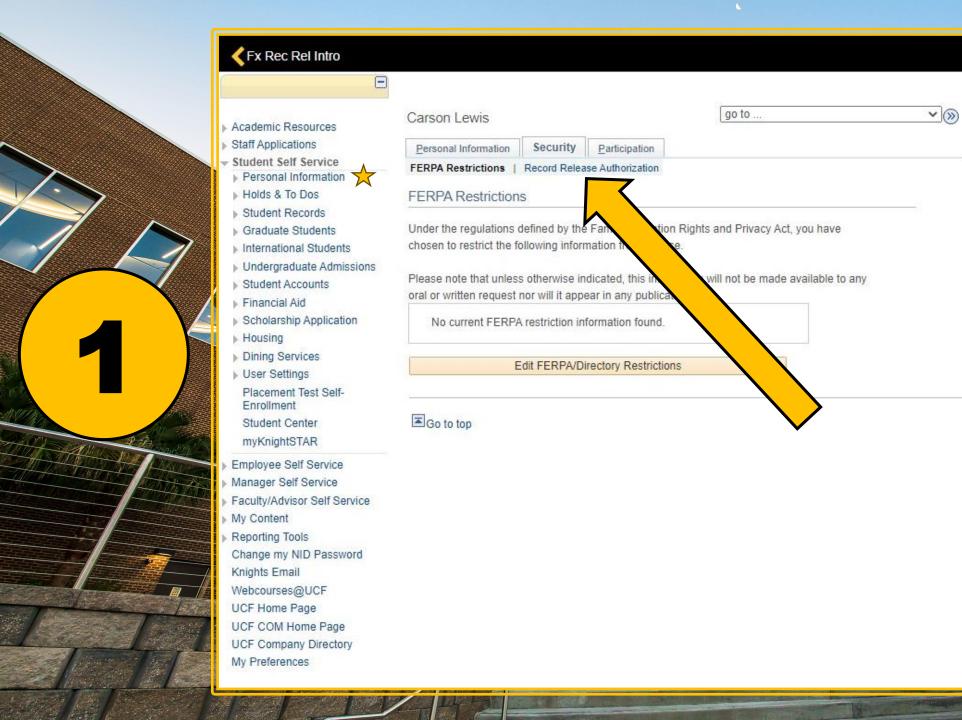




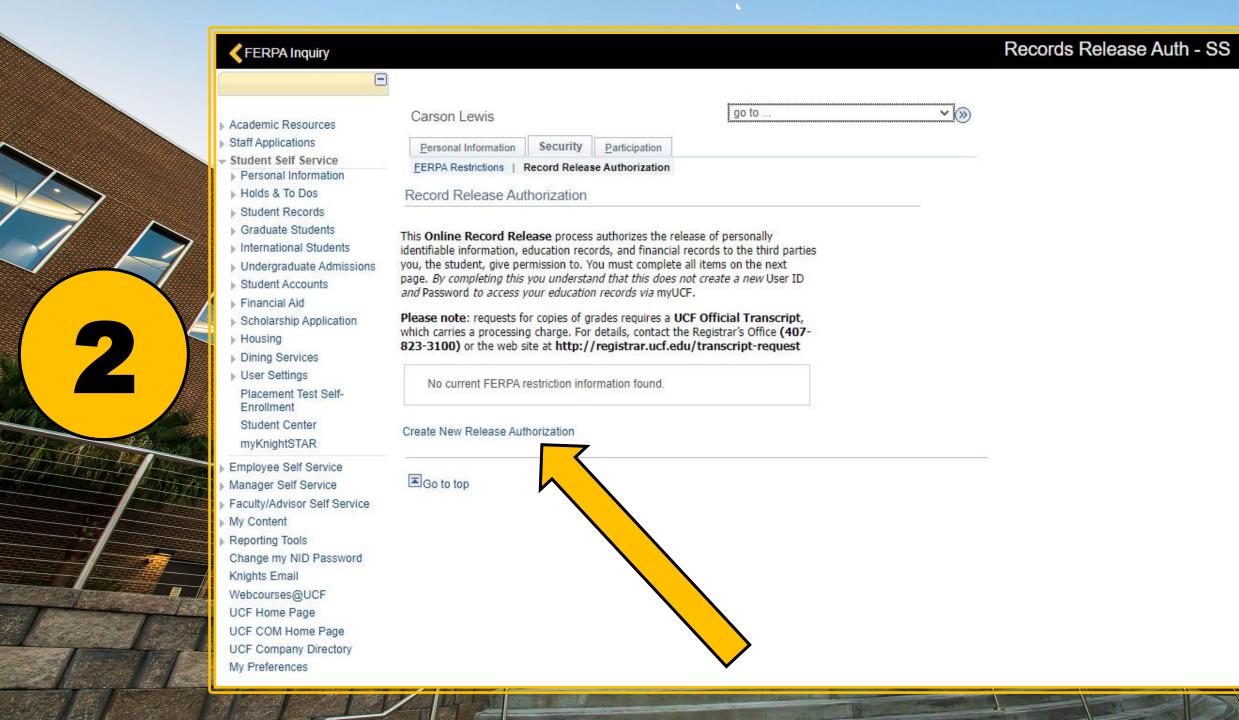
UCF POLICIES



- FERPA: Family Education Rights & Privacy Act
- HIPAA: Health Insurance Portability & Accountability Act
- Financial Aid Policy
- **♦** Other State Policies



FERPA/Directory Restrictions





Record Release Authorization

Choose the record(s) for which you authorize release, and designate one specific person, or one specific organization or agency to release the record(s) to. That one specific person can be yourself, if you are being advised remotely. Multiple persons and or multiple organizations/agencies will require multiple authorizations.

You must complete all areas including the name and address of the person (including yourself, if you are being advised remotely) or organization/agency to disclose to, the purpose of the disclosure, and if the disclosure may be made by phone, in person, or by email. If you choose to have your record(s) disclosed by phone or by email, you must provide a passcode that the person or organization/agency will need to provide prior to the disclosure or discussion of your record(s).

If there are records you wish to be released that are not on the list below, you will need to go to the Registrar's Office in Millican Hall, room 161 and request the paper version of the Records Release Authorization form. The release of disciplinary records information on Student Conduct Holds requires the completion of a disciplinary records waiver from the Office of Student Rights and Responsibilities.

You must click "SAVE" at the bottom of the page to finalize your authorization.

Authorization Status:

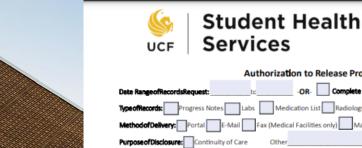
Name:



Records I authorize for release:

GPA (Requests for term grades requires transcript)
Academic Petitions
Financial Aid
Student Accounts charges, payments, and refunds
Academic Standing
Current Term Course Schedule
Residency Status (In-State Student/Out-of-State)
Gender
Knights Email Address
Other Email Address
Test Scores (AP, IB, CLEP, SAT, GRE)
Advising Notes
Holds (reasons and amounts)
1098-T Tax Information
Readmission
Graduation and degree progress
Grades

I authorize the following Person, Organization or Agency to discuss the above records with UCF personnel:



Health Information Management Department 4098 Libra Drive, Orlando, FL 32816-3333 Tel 407.823.2701 Opt. 3 | Fax 407.823.3359

Authoriza ti on to Release I	-10	ıecı	euı	пеа	ш	шп	rormai	JOI
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Date Rangeo/RecordsRequest:tdtdtCOMplete Record (All Records All Dates)									
TypeofRecords: Progress Notes Labs Medication List Radiology report/images Billing Other (Please specify)									
MethodofDelivery: Portal E-Mail Fax (Medical Facilities only) Mail Pick-up									
Purpose of Disclosure: Continuity of Care Other									
electing Consent to Discuss allows UCF SHS to discuss your medical care, treatment, billing, services, etc. to whomever is designated on the form. The question can be anything as simple as "What is the family dog's name?" Choose a question and answer that only you and the designated individual would know.									
Consentto Discuss(security question) Answer:									
Requested records will NOT include the following information unless initialed									
HIV/AIDSPsychiatric RecordsDrug and/or Alcohol AbuseSTDSexual Assault Records									
The confidentiality of these records is required under U.S. Public Law 104, 42 CFR Part 2, and Florida State Law. This material shall not be transmitted or re-disclosed to anyone without written consent or authorization as provided in these statutes. Please note: Any records released will include a current medication list that may be related to the above information.									
	Entity Releasing Information			Entity Receiving Inform	nation				
Name:			Name:						
Address:			Address:						
Phone:	Fax:		Phone:	R	ax:				
Email:			Email:						
 I understand if the requester or receiver is not a health plan or health care provider, the released information may no longer be protected by federal privacy laws and may be re-disclosed. I understand that I may ask and get a copy of this authorization after I sign it. 									
UCF Student Health Services may not deny treatment, payment, enrollment or eligibility for benefits based on whether or not I sign this authorization.									
 I understand that I may revoke this authorization at any me by notifying the providing organization in writing, but if I do, it won't have any effect on any actions UCF Student Health Services took before they received the revocation. 									
I understand that this authorization will expire 1 year from date signed unless another date is specified for continuous exchange of information. Expiration Date:									
Print Na	ime:		Date:						
Patient S	Signature:	Date of Birth:	UCF ID#:						
Signature of Parent or legal Guardian:			Date:						
Witness Name & Signature: Date:									

The documents accompanying this telecopy transmission contain confidential information belonging to the sender that is legally privileged. This information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or action taken in reliance on the contents of these documents is strictly prohibited. If you received this telecopy in error, please notify

https://studenthealth.ucf.edu /forms/

Health Privacy & Medical Records

Authorization to Release Protected Health Information



- Authorization to Release Dental Records
- 🛭 Consent to Treat a Minor See Immunization Form, Section D
- 🛭 Notice of Privacy Practices
- 🖪 HIPAA Privacy Request Form
- Advanced Directives (directs to third-party website)





ACADEMIC BASICS



- Colleges
- Majors and Minors
- Curriculum
- Academic Success Coaches
- Registration



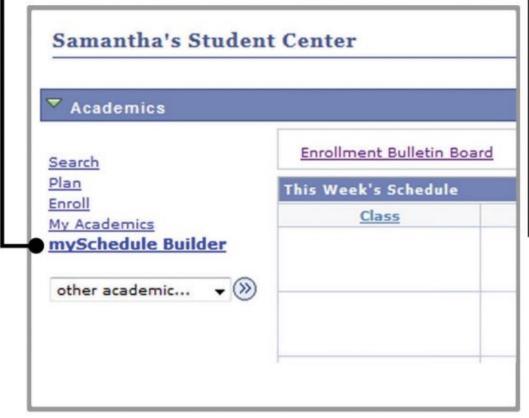
mySchedule Builder

LOG IN

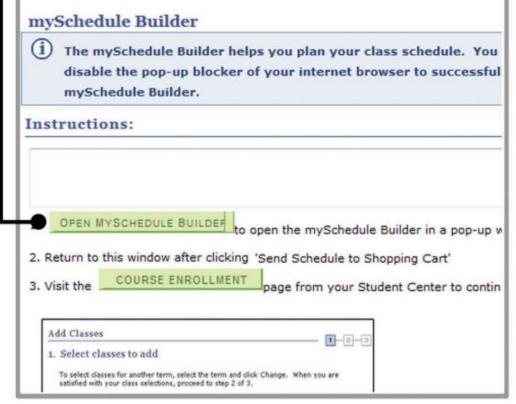
Log into myUCF

Click Student Center

Click "mySchedule Builder"



"Click Here" To Easily Plan Your Class Schedule





From the "View" Schedule Screen, Click the "Shopping Cart" Button to Begin Registration

myKnight STAR

Student Online Scheduling via myKnight STAR



- 1. Login to myUCF
- 2. Access your Student Self Service menu and then select myKnight STAR
- 3. You will now be brought to the Student Home page of myKnight STAR. You will see your current class schedule on your home page. Select the **Schedule Appointment** button on the right.



Select your advisor

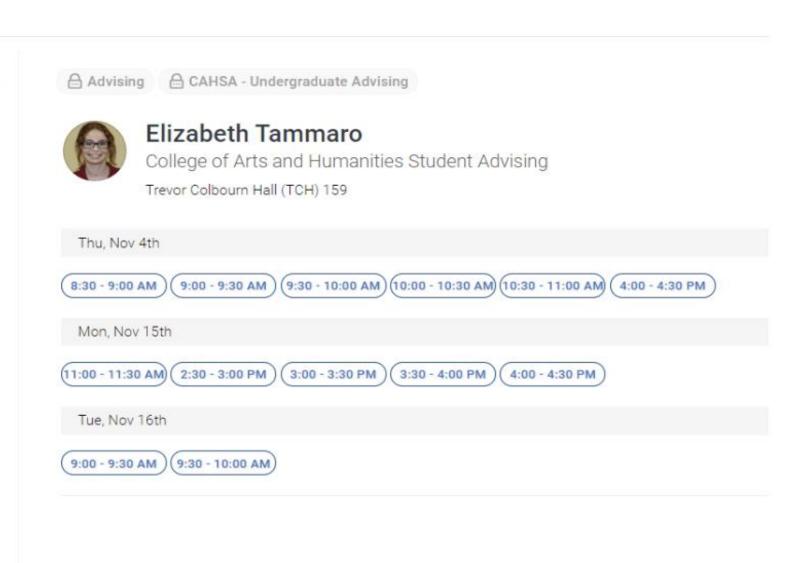
Your appointment will be scheduled with your assigned advisor in CAHSA.

New Appointment

All Filters Start Over What type of appointment would you like to schedule? Advising Service CAHSA - Undergraduate Advising Pick a Date (1) Th Fr Mo We 5 10 11 12 13 15 16 20 22 23 24 25 26 27

21

30



OUR AGENDA



- Who's Who
- UCF Systems
- Important Policies to Know
- Why This Is Important to
 - You



ACTION ITEMS



- 1. Defining your student's support system
- 2. Talk about how you will communicate information
- 3. Talk through hypothetical detours and bumps in the road
- 4. Keep calm and Go Knights!





RESOURCES



- Dean of Students: https://osrr.sdes.ucf.edu/contact/
- Ombuds: https://www.ombuds.ucf.edu/
- Student Care Services: https://scs.sdes.ucf.edu/
- First Year Experience: https://fye.sdes.ucf.edu/
- **FERPA:** https://registrar.ucf.edu/ferpa/



HIPAA: https://studenthealth.ucf.edu/records/

All Things Academics starts at 10:30am