Section 1 - USER INFORMATION

Instructions: 1) Fill in Sections 1 & 2 and print the form. 2) Obtain proper authorization in Section 3. 3) Forward the form to the OneCard Office for activation.

Requestor ___________________________ Date ___________________________

Last First MI

CID ___________________________ Job Title ___________________________

Section 2 - TYPE OF ACCESS REQUESTED

List Buildings (i.e. Residence Halls or specific areas or locations) and times that access will be required (i.e. 8-5, M-F, workday, weekends, or 24/7). (DO NOT ASK TO COPY ANOTHER USER):

Building ___________________________ Area(s) ___________________________ Schedule Needed ___________________________

Start Date ___________ End Date ___________ Reason for Access ___________________________

Staff/Faculty needing door access for doors not in their area need to complete the request form. Once approval is received by the manager of the requested doors, the access will be added to the staff/faculty’s ID.

Section 3 - AUTHORIZATION

Staff/faculty CS Gold’s door access is authorized by the requested door departmental supervisor (Director/Department Chair/Dean/Door Manager). By signing below, the supervisor certifies that the access requested is approved and the OneCard Office will be notified if the staff/faculty’s duties change during the course of their requested access dates.

Signature of Supervisor ___________________________ Printed Name ___________________________ Phone ___________________________

For OneCard Use Only: Date Completed ___________________________ Initials ___________________________

Last Revised 6/22/17