

ECE ACCESS REQUEST FORM

Section 1: Access Requestor Information: Please Type/ Print Clearly. Incomplete/Illegible Forms will be returned.

REQUESTOR'S LAST NAME (Required)	REQUESTOR'S FIRST NAME(Required)	M.I.
6017090	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	
REQUESTOR'S CATCARD NUMBER (Required)	CELL/PHONE NUMBER (Required)	

UNIVERSITY OF ARIZONA E-MAIL ADDRESS (Required)	UA NetID (Required)
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Requestor Status: (Check One) (Required)

Faculty
 Staff
 Visitor
 Post-Doc
 Graduate Student
 Undergraduate Student
 Other _____

Applicant Signature (Required): _____ **DATE** _____

"My signature on this document confirms that I have received the links of the Access Policies of the ECE Department and the University of Arizona and agree to abide by them."

University of Arizona Facilities Management Key Issuance & Return Guidelines:

<https://www.fm.arizona.edu/documents/LocksandKeys/UA%20Key%20Issuance%20and%20Return%20Guidelines.pdf>

ECEBuilding/Room Access Policy:

https://ece.engineering.arizona.edu/sites/ece.engineering.arizona.edu/files/ECE-Building-Access-Policy_August-2017.pdf

If you have received Previous Access to the ECE Building, Please Check the "RENEWAL" Box.

RENEWAL



**Section 2: THIS SECTION IS FOR THE FACULTY / STAFF MEMBER AUTHORIZING ACCESS
(Shaded Areas for the Department Access Coordinators.)**

Faculty/Staff, If you wish the Applicant to have access to the building after hours, please write "Entrance" in the "Requested Access" Space. Building Access is **NOT** Automatic.

Requested Access	Hook #	T-2 User #	T-3 User #	In Initial	In Date	Out Initial	Out Date

EXPIRATION DATE (4 Years Maximum.) (Required)

ECE Professor: _____

PRINTED NAME (Required)	SIGNATURE (Required)
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