Building and Laboratory Access Request Form

All persons who will be teaching, conducting research, or working in any UAA laboratory should complete this form for initial swipe-card access. Contact Lab Support or your Building Manager should your access needs change.

Please read the Building Access Policy and Controlled Space Access Plan before completing this form.

Access will be granted with the completion of appropriate, documented training.

Print Applicant Name: _______________________________ UAA ID#: __________________
Print Supervisor Name: _______________________________

Status (check all that apply)
☐ PI (Principal Investigator)  ☐ Adjunct Instructor  ☐ HS Student
☐ Faculty  ☐ Post Doc  ☐ Minor (under 18)
☐ Affiliate Faculty  ☐ Staff/ Employee  ☐ Visitor
☐ Visiting Faculty  ☐ Graduate Student  ☐ Volunteer
☐ Term Instructor  ☐ Undergraduate Student  ☐ Other

Building(s) Access (check those that apply). List room numbers for each building for which you are requesting access.

☐ BMH _______________________________  ☐ EBL _______________________________
☐ CPISB _______________________________  ☐ NSB _______________________________

Starting Date: ___________________________ Ending Date: ___________________________

Access hours requested:
☐ 24 hour/7 days  ☐ 7am-10pm/ 7 days  ☐ 7am-10pm M-F  ☐ 8am-5pm M-F

Applicant: I acknowledge reading, understanding, and agree to abide by the Laboratory Access Policy. I also agree to abide by all other pertinent UAA policy and procedures.

Signature: _______________________________ Date: __________________

Supervisor: By signing this document, I have made clear to the applicant that they will abide by all pertinent UAA policy and procedures.

Signature: _______________________________ Date: __________________