

# KEY REQUEST & CARD SWIPE REQUEST FORM

Name: \_\_\_\_\_  
Last First

OSU Email/ Name.# \_\_\_\_\_

Employee/Student # (the short # on front of BuckID): \_\_\_\_\_

BuckID # (the long # on front of BuckID): \_\_\_\_\_

Title: \_\_\_\_\_ Supervisor/Group: \_\_\_\_\_

## KEYS (If you need keys fill out this section, if not leave blank)

- Do you need an outside-door key for **Celeste Lab** or **Evans Lab**? (MUA-44)  
circle→ Yes No
- Do you need an outside-door key for **Newman/Wolfrom Lab** or **McPherson Lab**? (J5A-1)  
circle→ Yes No
- Do you need keys for 1 or more specific rooms? List all below

Building	Room #'s

## CARD SWIPE (If you need card swipe access to CBEC, fill out this section)

- Do you need swipe access to the outside door of CBEC after-hours or weekends?  
Circle→ Yes No
- Do you need swipe access to labs or other rooms in CBEC? List all below

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**If you are requesting an outside-door key, you must obtain authorization from Kevin Dill in CBEC 165**

Kevin Dill \_\_\_\_\_ Date: \_\_\_\_\_

**To Applicant Advisor: I have discussed with this applicant the safety procedures & precautions that must be followed while the applicant is under my supervision.**

Supervisor sign: \_\_\_\_\_ Date: \_\_\_\_\_

**To the Applicant: I understand the safety procedures and precautions as explained to me by my supervisor. I agree that I will not permit an unauthorized person to have access to these buildings or rooms.**

Applicant sign: \_\_\_\_\_ Date: \_\_\_\_\_