Security and safety of all personnel within the HSSEAS are of paramount importance to the units within the building and the campus. Access to these buildings after designated hours is a privilege that can only be granted by designated campus officials (Department Chairs for All Academic Units and Designated Managers for Non-Academic Units).

Please fill out this form and submit for approval to ______________________.

<table>
<thead>
<tr>
<th>Requester Name</th>
<th>Department</th>
<th>UID Number</th>
<th>Building</th>
<th>Extension</th>
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**REQUESTED DATES FOR ACCESS**

<table>
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<th>START:</th>
<th>END:</th>
</tr>
</thead>
</table>

**STATUS**

- [ ] Faculty
- [ ] Non-Academic Staff (Full-time)
- [ ] Visiting Scholar
- [ ] Post-Doctoral
- [ ] Graduate Student
- [ ] Student-Employee (Part-time)
- [ ] Undergraduate Researcher
- [ ] Other (Explain)

<table>
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<th>REASON FOR REQUEST</th>
</tr>
</thead>
</table>

**SIGNATURE**

Signature: ______________________ Date: __________

**SIGNATURE OF SUPPORT**

(Faculty Advisor or Supervisor): ______________________ Date: __________

Print Name: ______________________

**SIGNATURE OF APPROVAL**

(Dept. Chair or Unit Manager): ______________________ Date: __________

Print Name: ______________________

**OFFICIAL USE ONLY**

Please fill out at Bruin Card activation and deactivation.

Date of Activation: ______________ Signature: ______________________

Date of Deactivation: ______________ Print Name: ______________________