

**Applicant Information**

Date of completion \_\_\_\_\_

Last Name:		First Name:	
Student/Employee #:		Department:	
Email:		Phone:	
Status:		Date of Expiry:	

**Areas Requested**

<input type="checkbox"/> Caretaking	<input type="checkbox"/> General Storage	<input type="checkbox"/> IITS	<input type="checkbox"/> Mechanical/Electrical
<input type="checkbox"/> Penthouse	<input type="checkbox"/> Roof	<input type="checkbox"/> Security	

**Levels**

<input type="checkbox"/> Exterior Doors	<input type="checkbox"/> Level 1-5	<input type="checkbox"/> Level 2	<input type="checkbox"/> Level 3
<input type="checkbox"/> Level 4	<input type="checkbox"/> Level 5	<input type="checkbox"/> Basement	<input type="checkbox"/> Tunnel

Other

Ralph Campbell Lounge (Staff Only)

**Authorized Signature**

Supervisor name \_\_\_\_\_

Print Name:		Date	
Signature:			
CC:		CFC:	
Fund:		IO:	

**Acknowledge receipt**

Card/Fob#	_____	Date	_____
Print Name	_____	Signature	_____