

**Applicant Information**

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

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

**Highland Hall**

<input type="checkbox"/> Classrooms	<input type="checkbox"/> Conference Services	<input type="checkbox"/> CTL	<input type="checkbox"/> Exam Centre
<input type="checkbox"/> The Hub	<input type="checkbox"/> Perimeter	<input type="checkbox"/> Library storage (B124E)	

**Registrar's Office**

<input type="checkbox"/> Registrar's Office	<input type="checkbox"/> Exam Storage	<input type="checkbox"/>	<input type="checkbox"/>
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**Social Sciences**

<input type="checkbox"/> Anthropology	<input type="checkbox"/> Anthropology Lab	<input type="checkbox"/> CCDS	<input type="checkbox"/> Geography
<input type="checkbox"/> Health and Society	<input type="checkbox"/> Political Science	<input type="checkbox"/> Sociology	<input type="checkbox"/> SS Staff
<input type="checkbox"/> 205 GIS Lab			

**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	_____