## STUDENT KEY/CODE ACCESS REQUEST FORM



Student Name:			Student ID:		
Rese	earch Course*	☐ Non-Research Course	☐ Grant Funded Position	☐ Volunteer Work**	
			tone, Master Project or Master Thesis. Management <u>https://www.csuci.edu/rm</u>		
For non-	research cours	se or volunteer work, provide sp	ecific reason(s) for access:		
Supervi	sing PI (Facult	ty)/ Staff:			
Building	g Location(s)/F	Room #'s:			
Acaden	nic year:				
docume	ents to your Su Online safety t CI Specific Saf	rainings with certificates rety Information Form	completely and submit it with t		
	-	·	completed with Supervising PI/S	otan)	
For Key	/Code Access	you must agree to the following	ng:		
	After hours use is non-transfer	-	requesting access and other aut	horized users. Facility access	
	projects. Stude	ents will not have access to mat	are strictly for the use of work in terials or supplies that are locked	without prior approval.	
4.	Broken equipm Technician, or	nent needs to be reported imme	e been trained to use the equipm ediately to the Supervising PI/Staf nat says "broken" to prevent use. I 'S.	f, Instructional Support	
5.	No visitors allo	owed in the space after hours.			
	<del>-</del>	be propped open.			
7.	Student acces	s will be removed when no long	er enrolled in the relevant course	(S).	
Access	will be limited	l to: Monday – Thursday 8:00	AM – 10:00PM; Friday – Sunda	y 12:00PM – 5:00PM	
	o comply with Conduct invol	·	n denied access or immediate ac	cess removal and potential	
l ackno	wledge that I	have read, understood, and	will abide by the requiremen	ts listed above.	
Student	t Signature:			Date:	
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Supervising PI/ Staff Signature:

\_Date: \_\_\_\_\_