

## CNC Key/Fob/Access Request Form

### Instructions:

Requests to be submitted by the employee's Administrative office only. Please complete all sections of this form. Incomplete forms will not be processed. This request must be approved by the appropriate person (Director, Manager, Dean, Associate Dean, VP, AVP, President) of the area to be accessed. Email completed forms to Facilities services (facilities@cnc.bc.ca)

### 1. Individual Requiring Access

- First and Last Name: \_\_\_\_\_ College Employee ID #: \_\_\_\_\_
- Job Title/Role and Department: \_\_\_\_\_

### 2. Request Submitted By (if different from above)

- First and Last Name: \_\_\_\_\_
- Job Title/Role: \_\_\_\_\_

### 3. Access Requested

- Department/Division: \_\_\_\_\_
- Building(s) and/or Room(s) to Access: \_\_\_\_\_
- Start Date: \_\_\_\_\_ End Date (if one): \_\_\_\_\_ ☐ Ongoing Access

### 4. Approval

- Name of Approver: \_\_\_\_\_
- Title: \_\_\_\_\_
- Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FACILITIES USE ONLY

- Key/Card Issued: Yes No \_\_\_\_\_
- Key# or Card ID: \_\_\_\_\_
- Roles/Access Added: \_\_\_\_\_
- Issued By: \_\_\_\_\_
- Date Issued: \_\_\_\_\_