# Student Group Access

## Request for Cards/Keys

Please allow three working days to complete from date submitted to Harvard Yard Operations Office.

**Date of Request (D/M/Y):** ____________________________

**Hydro Received Request:** ____________________________

**Group:** ____________________________________________

**Email:** ____________________________

**Contact Name:** _____________________________________

**Email:** ____________________________

**Contact Phone (Office):** ____________________________

**Contact Phone (Home):** ____________________________

**Note:** Student Groups must establish one contact for each academic year and obtain a signature from the Dean of Students Office. Harvard Yard Operations should be notified immediately of any changes.

**Request:**

I ____________________________ request that the following ID cards be programmed to operate ____________________________.

**Keys Must Not Be Copied**

We also would like to request keys to operate Office #________# of Keys_______ Key Code_______

If available, please fill in the following table:

<table>
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<tr>
<th>Name</th>
<th>Affiliation</th>
<th>Harvard I.D.#</th>
<th>Office Use Only</th>
<th>Card #</th>
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**Department Administrator or Dean of Students Office**

Please print name: ____________________________

Signature: ____________________________

**Yard Operations Manager**

Please print name: ____________________________

Signature: ____________________________

**Yard Operations Staff**

Please print initials: ____________________________

Sign initials: ____________________________