

SCIENCE CENTER BUILDING OPERATIONS

Key and Card Access Request Form

For key requests: bring completed form to room B11 (across from elevators on basement level).

For card access only: email completed form to sc_sched@fas.harvard.edu.

Department: _____ Date: _____

Name _____ or HUID#: _____

Office #: _____ Email Address: _____

Authorized by: _____ Telephone: _____

KEY REQUEST

Room # or Key # (please list): _____

Department master keys (please list): _____

Note/Special Instructions: _____

Authorized Signature: _____

sign name

print name

HUID CARD ACCESS REQUEST

Room numbers; corridors and stairwells; Department access (Please list):

Duration of access:

Start Date: _____

End Date: _____

Note/Special Instructions: _____

Authorized Signature: _____

sign name

print name

Science Center Building Operations Use Only

Key Database Transaction #: _____

Date key distributed: _____

C*Cure: _____

Date card access given: _____