

## **ACCESS REQUEST**

## Keys and proximity card authorizations issued by the UNM-Valencia Police Dept. only.

Name:			Banner ID #	t:	Date: Email:		
Department:			Tel. #:				
Faculty	,	П [	emporary P	art-Time Faculty	Sta	aff	
Access Requested:							
Build	Ro	oom #	Building	Building Name Room #			
Department Head	I/Coordinator:						
(for Key Approvals ONLY)			Print Name		Signature		
Approved By:							
	Director of E	Business Ope	rations or De	esignee	Signature		
		(Print Na	me)				
Dravimity Card Aut	harizations (Dir	actor of Duci	nass Oparati	ons or Dosignos ON	II V\.		
Proximity Card Aut					NLT).		
1E2	NO Date:			Ву:	Initial He	ere	
Lost/Stolen keys o	•		•			•	
the appropriate De any keys reported a					•		acing
keys/proximity care				•			VS,
\$15.00 for proximit				•			•
(from the Cashier's	Office) is requi	ired prior to	issuing repla	cement key(s)/prox	imity card.		
I have read and agr	oo to the policy	, and will re	turn tha issu	od kov(s) and provi	mity card to	tha LININA Val	oncia
Police Dept. upon r				ed key(s) and proxi	ility card to	the Olvivi-vai	Cilcia
					,	,	
Key Recipient (to sign at time key is issued)				/ Date			
				DELOVA/ TILLC LINE	Date		
	·	JNIVI-V POLIC	E USE ONLY	BELOW THIS LINE			
Keys Issued				Keys Returned			
Date Issued	Key#	Hook #	By (Initials)	Date Returned	Key#	Hook #	Received By
	1	<del> </del>			1	+	1