

Chadron State College
Request for EagleCard Door Access

Signatures below indicate an understanding and agreement of the liability issues (including expenses) related to the issuance of CSC key(s); inappropriate use of keys may result in disciplinary or legal action.
See Employee Handbook, page 5, for key policy.

Employee Name: _____ NUID: _____

Employee Signature: _____ Date: _____

Reason for Access: _____

Access Requested:

Residence Halls

24/7 Access	7:30-4:30M-F Access	Building
<input type="checkbox"/>	<input type="checkbox"/>	Andrews Hall East External
<input type="checkbox"/>	<input type="checkbox"/>	Brooks Hall South External
<input type="checkbox"/>	<input type="checkbox"/>	Eagle Ridge 1 External doors
<input type="checkbox"/>	<input type="checkbox"/>	Eagle Ridge 2 External doors
<input type="checkbox"/>	<input type="checkbox"/>	Eagle Ridge 3 External doors
<input type="checkbox"/>	<input type="checkbox"/>	Edna Hall South External
<input type="checkbox"/>	<input type="checkbox"/>	High Rise North External
<input type="checkbox"/>	<input type="checkbox"/>	Kent Hall West External

Campus Buildings

24/7 Access	7:30-4:30M-F Access	Building
<input type="checkbox"/>	<input type="checkbox"/>	NPAC Hall East External
<input type="checkbox"/>	<input type="checkbox"/>	Student Center South External

Supervisor Approval/Signature: _____ Date: _____

Building Manager Approval/Signature: _____ Date: _____

VP Admin & Finance Approval/Signature: _____ Date: _____

To be Completed by Department of Information Technology

ID Card System Entry: _____ Date: _____

Person in Group – Group Name(s): _____

Group in Rule Set – Rule Set(s): _____