Building/Office Access Request
Computer Science Department
North Carolina State University

Name: ____________________________________________________________________________ (Please Print)

Phone #: ___________________ E-mail: __________________________ ID#: _______________

Faculty/Staff □ Visiting Faculty □

Temporary Employee □

Student □ Graduate □ Undergraduate □

Room number needing access to: ____________________________________________
Room Name needing access to: ____________________________________________
__________________________________________
__________________________________________
__________________________________________

Expiration Date of Appointment: ____________________________________________
(Date)

Approved by: ___________________________/______________________________
(Printed Name) (Signature)

Date Issued: ____________________________ Key Returned: _______________________

Key #: _________________________________ Wolfpack One
Card #: ______________________________

By signing below I acknowledge that I have received the key(s) and/or access on the Wolfpack One Card listed above. I understand that I am solely responsible for these items and if I do not return the key(s) (if applicable), my final grades will be held. It is my responsibility to check in each semester before the last day of class if I will continue to need the key(s) and/or access on the Wolfpack One Card for the next semester. Failure to check in will result in deactivation of the Wolfpack One Card access. In the event the Wolfpack One Card is lost or damaged, I understand the replacement cost will be $20.00 AND I WILL BE REQUIRED TO PAY THIS FEE AT THE WOLFPACK ONE CARD OFFICE located in the West Dunn Building.

__________________________________________  _______________________
Signature          Date