UNDERGRADUATE PRELIMINARY KEY REQUEST FORM

Last Name: ____________________________ Full Legal First Name and Middle Initial: ____________________________
CSU ID Number: ____________________________ Email: ____________________________
Your Office Room Number: ____________________________ Your Office Phone Number: ____________________________

Room Number of Metal Keys You Are Requesting:

Key Card Clearance You Are Requesting:

☐ Chemistry CIF B115 XRD*
☐ Chemistry CIF B2 600 NMR*
☐ Chemistry CIF Basement Main Lab*
☐ Chemistry CIF C3A Magnetic Properties Lab*
☐ Chemistry CIF C3E 500 NMR*
☐ Chemistry CIF C4 XPS/XRD Lab*
☐ Chemistry CIF Yates 101 Imaging*
☐ Chemistry Main Lobby Entry
☐ Chemistry UG (Yates 412)
☐ Chemistry UG RA (Main Lobby Entry)
☐ Other ____________________________

☐ Chemistry RB 1st Floor (includes RB Building Entry)
☐ Chemistry RB 2nd Floor (includes RB Building Entry)
☐ Chemistry RB 3rd Floor (includes RB Building Entry)
☐ Chemistry RB 4th Floor (includes RB Building Entry)
☐ Chemistry RB 204N Radiation Room
☐ Chemistry RB Building Entry
☐ Chemistry RB CIF 109 Main Lab*
☐ Chemistry RB CIF 204L SCD*
☐ Other ____________________________

*CIF Staff approval is required for ALL CIF clearances PRIOR to form submission.

RETURN FORM TO CINDY UNGERMAN, ROOM B303

☐ Yes Chemistry Major
☐ No Major: ____________________________

FOR OFFICE USE ONLY

__________________________
CLU

FINAL APPROVAL

_________ ____________________________
Date Signature AND Printed Name of Faculty Advisor, Supervisor, or Responsible Party

Agreement for Undergraduate Access to the Chemistry Building

Undergraduate access to the Chemistry Building will only be granted to undergraduate students agreeing to the following policies:

1. The undergraduate student MUST have sufficient, previous research experience to pose no danger to others in the laboratory.

2. Undergraduate students are NEVER allowed to work in the laboratory alone. Someone else must ALWAYS be present in the laboratory, within sight and hearing, should an accident occur.

3. Should an undergraduate student gain access to the building after hours, and find that the laboratory that they plan to work in is unoccupied, the student MUST leave the building IMMEDIATELY.

4. The undergraduate student will NOT allow building access to any other individual.

I understand and I agree to abide by these policies at ALL times.

Student Signature ____________________________ Date ____________________________

I accept full responsibility to ensure that these policies are strictly enforced in my laboratories.

Faculty Signature ____________________________ Date ____________________________