FACILITY ACCESS FORM

Please return a completed copy of this form to facilityaccess@rctc.edu

PURPOSE: To grant authority for an individual to access College locations during times when those locations are locked. Such authorization acknowledges that the individual to whom access is assigned has the authority and the functional responsibility to enter those locations. The person to whom access is being granted must read and agree to comply with RCTC Policy 5.23.1 prior to receiving the access requested. This form is administered by Finance and Facilities who will record the approval of such access requests and maintain this document in their files.

RESTRICTIONS:

- This facility authorization grants access only to the Requestor named on this form.
- Access is limited to the areas approved on this form.
- · Access is restricted to the specified and approved days and times.
- Access to the facility will be for the approved purpose and by the approved means, as determined by Finance and Facilities.

LOST OR STOLEN KEY/KEYCARDS:

• The loss of a key/keycard must be reported immediately to Finance and Facilities by the individual to whom the key/access card has been issued. Completion of a new form will be required.

ACCESS CHANGES:

 If access needs to be changed from those which have been granted herein, the said individual will notify Finance and Facilities for completion of a new Facility Access Form.

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*All fields below are required unless otherwise noted ame of Requestor (Print): Date of Request:				
Phone Number:				
Department / Company:				
Name of Immediate Supervisor (Prin				
(Optional) Names of individuals that				
Area(s) Requestor Needs Access To:				
Justification for Access:			Access Is Required:	
Days Access Is Required:		From:		
Monday Tuesday We	dnesday Thursday I	riday Saturday	Sunday To:	
the supervisor, Security Office, and Physica and/or termination. Any individual who leads third party individual, vendor, contractor and Security Office prior to accessing the face of Keys/cards provided to a vendor, and not expense of the third party vendor/contractor.	oses keys/cards, may be assessed a c r (who is not a tenant of the campu facilities (a Valid Driver's License m returned, may result in a breach of	narge that could include up), must complete and sign ay be retained by the Colles	p to the cost to rekey as a prev a Facility Access Form, and su ge until key/card taken upon	ventative measure. submit to the Campus Safety issuance are returned).
	ACCEPTANCE:			
*A 48 hour ADVANCE NOTICE is required in order for the Requestor to obtain access to College local times when those locations are locked. *All other key/key cards: \$50 each *A 48 hour ADVANCE NOTICE is required in order for the Requestor to obtain access to College local times when those locations are locked. For questions and comments, please email facilityaccess@rctc.edu				to College locations during
,	e Security office at 507-280-3175 or <u>f</u> t the Business office at 507-280-2969		*	
I have been advised of <u>RCTC Policy 5.23.1</u> Facilities, I agree to comply in full with the			accepting keys and/or keycard	ls from Finance and
Requestor Signature:		Date:		
RCTC OFFICE USE ONLY: Approved By: Project Manager/Physical Pl	ant Director	CIO/Projects 8	& Events Lead	Date:
Photo Verification: Yes No				



