

## Swipe Card Access / Key Request

NAME		EMAIL			
BANNER ID	NUMBER	PHONE			
Last 8 digits of	f your Lobo ID Care	d (this is not your Banner ID)			
Graduate Stu	dent 🔲 U	ndergraduate Student	Staff		Faculty
Supervisor or P	<b>Í Approval</b> (REQUIRI	ED)			
SIGNATURE					PRINTED NAME
Lab Manager Ap	oproval required	for access to all Labs			
Dr. Muhammad	Saeed Zafar, Mana	ager, GM CCEE Labs			
	RD ACCESS (ad	d additional page if necessary)			
SWIPE CA					
	hours for the exterior d	loors are M-Sat /:00am to /:30pm			
	•	REASON FOR ACCESS		EX	PIRATION DATE
Normal access	•	· ·		EX	PIRATION DATE
Normal access	•	· ·		EX	PIRATION DATE
Normal access	•	· ·		EX	PIRATION DATE

OFFICE/LAB KEYS (Department Chair signature required for all keys)

ROOM#	NAME	KEY NUMBER(S)	REASON FOR ACCESS

## Dr. Susan Bogus Halter, Department Chair \_\_\_\_\_

Once your key request has been processed, you will receive an email notice with a link so you can schedule your appointment to pick up your key(s) at the UNM Lock Shop.

In the event of a lost or stolen key, the Lock Shop will hold you responsible, not GMCCEE. There is a \$10 fee for each missing key.

## Email completed, signed form to civil@unm.edu