

SoE KEY AND ACCESS REQUEST FORM

This form must be completed by the employee's supervisor and emailed to the appropriate SoE Local Access Controller (see page 2 for LAC list). Please allow one week for processing once received by the LAC.

Please review the SoE Access Control Policy before submitting this request:
<http://businessoffice.education.wisc.edu/bo/building-services/access-control-policy>

Master level key requests must be signed and approved by Department Chairs or Unit Directors using the SoE Master Key Request Form found here: <http://businessoffice.education.wisc.edu/bo/building-services/key-and-access-request-forms>

EMPLOYEE INFORMATION

Name: Title:
 Dept/Unit: Email:
 Appointment Type: Faculty/Staff PA TA LTE Student Hourly Zero Dollar
 UW ID Number (10 digits)

EMPLOYMENT DATES (mm/dd/yyyy)

Check here if this is for an existing employee, and skip to the next section.

Start Date: Start Date is the official date the employee is on payroll as listed in his/her letter of offer; and as submitted on the JEMS Hire Form for classified staff; or as entered electronically in JEMS Hire.
 End Date:

SUPERVISOR INFORMATION

Name: Email:

KEY AND ACCESS REQUEST

Please list the building(s) and room(s) this employee will need access to the SoE Local Access Key Controller will order and issue the lowest level key(s) and/or card access required.

BUILDING	ROOM/AREA	JUSTIFICATION

Notes:

SUPERVISOR'S SIGNATURE: _____ **DATE:** _____

<i>SoE LAC Use Only</i>	Processed by: <input type="text"/>
Approved Keys:	<input type="text"/>
Approved Areas:	<input type="text"/>
Notification sent to supervisor and employee	