

Instructions for completing Card Access Request Form

Below is the form to be completed for card access requests for the University of Wisconsin-Stout. There are some restrictions for students related to access. Please see the red information below.

On the form, "TYPE" refers to what type of card holder is requesting access.

Academic Staff	AS
Classified Staff	CS
Faculty	FS
Limited Term	LTE
Student Staff	SS
Student	STU – No need to complete Campus Address or Phone Ext. on form

NOTE: People needing access must have the ID portion of their Stout OneCard activated. If they do not, refer them to: <http://www.uwstout.edu/campuscard>

ID NUMBER: IS NOT THE 16-DIGIT EMBOSSED NUMBER ON THE FRONT OF THE CARD. IT IS THE 7-DIGIT NUMBER ON THE LOWER LEFT FRONT OR 9-DIGIT NUMBER ON THE LOWER LEFT BACK OF THE CARD

Academic/Classified Staff/Faculty – Exterior Access – Complete Start Date only. Will have 24x7 Access Interior Access – Complete Start Date only. Time parameters up to their supervisor

LTE – Exterior and Interior Access – Complete all sections. Time parameters up to their supervisor

Students – for Lab and Classroom Admittance – Exterior and Interior Access – Recommended End Date is the end of each semester.

Student Employees – Exterior and Interior Access – Recommended End Date is last day of the student's work authorization, in May for current academic year employment and in August for current summer employment. Time Schedules should be specific to work schedule if possible; ultimately up to their supervisor.

Students with Disabilities – Exterior and Interior Access – Recommended End Date - same dates as Student Employees.

Completed forms need to be sent to the building supervisor for approval. A current list of Building Supervisors can be found at www.uwstout.edu/asls/Bldgsup.html

The form on the next page is a "forms fill-in" file. It can be completed online and then printed out by clicking on the "Print" button.

**University of Wisconsin-Stout
Card Access Request Form**

This form must be completed for all persons needing access to university buildings and/or rooms with card access.

PERSON(S) NEEDING ACCESS:

NAME	ID NUMBER	TYPE	DEPARTMENT AUTHORIZING	CAMPUS ADDRESS	PHONE EXT	E-MAIL ADDRESS

BUILDING NAME: _____ (One building per request form)

EXTERIOR ACCESS	INTERIOR ROOM/AREA	START DATE	END DATE <i>(see instruction page)</i>	DAYS OF WEEK <i>(see instruction page)</i>	START/END TIME <i>(see instruction page)</i>

Signatures:

Requestor's Supervisor/Coach/etc. Date Building Supervisor Date

To be entered by Building Supervisor Staff after data entry

_____	_____	_____
Who entered data into system	Date Completed	Date emailed to requestor