

DEPARTMENT OF EARTH OCEAN AND ATMOSPHERIC SCIENCES

KEY AUTHORIZATION FORM

ESB, EOS Main & EOS South

*****PLEASE READ*****

Procedure:

- Please submit completed form to EOAS Main Office Reception, ESB 2020-2207 Main Mall
- If you require **card key access**, please also complete the 'Card Key Authorization Form' on the back of this form
- You will receive an email from the UBC Key Desk after your key request has been processed by them and keys are ready for pick up. The email will include instructions as to where to pick up your keys.
- Approved key requests are only valid for *30 days* after which they become inactive and a new Form must be completed.

Note:

- **Key requests will not be processed until a fully completed EOAS Workplace Safety Orientation form is received and verified by the EOAS Main Office.**
- Key Office will collect a **refundable deposit of \$20** for new key users
- **Please identify any key that is a replacement for a lost or stolen key.**

Issued Keys:

Entrance:

- EOS South (9G15) (Faculty, Graduate Students, Postdocs, Visitors with offices in EOAS)

Please note that EOS Main access is by Card Key. See reverse side of this form.

Office: (please specify the building: ESB, EOS Main, EOS South)

- Bldg/Room Number: _____ Bldg/Room Number: _____
 Bldg/Room Number: _____ Bldg/Room Number: _____

Laboratory: (please specify the building: ESB, EOS Main, EOS South)

- Bldg/Room Number: _____ Bldg/Room Number: _____
 Bldg/Room Number: _____ Bldg/Room Number: _____

ECAC:

- EOS Main, Room 109

Grad Student SubMaster:

- EOS Main, 5G-4

Please encircle one*: Faculty / Staff / Undergrad / Grad / Postdoc / Visitor

(* required)

Date: _____

Requester's Name*: _____

UBC Card #: _____
(Required for card key access; 6-digit # on back of UBC card preceded by *, - or +)

Student/Employee #*: _____

SIN (Canadian Visitors Only): _____

Name of Supervisor*: _____

Supervisor Signature*: _____

Requester's Email*: _____

Requester's Signature*: _____

Office Use Only:

Key Request #:

Date Processed:

Visitor Card #:

DEPARTMENT OF EARTH OCEAN AND ATMOSPHERIC SCIENCES

CARD KEY AUTHORIZATION FORM

ESB & EOS Main only

Important:

Please also complete the Key Authorization Form on the back of this form.

ESB

Please check all that apply:

<input type="checkbox"/> Basement	<input type="checkbox"/> After-hours access to building
<input type="checkbox"/> After-hours access to 2 nd Floor	<input type="checkbox"/> After-hours access to 3 rd Floor
<input type="checkbox"/> After-hours access to 4 th Floor	<input type="checkbox"/> After-hours access to 5 th Floor
<input type="checkbox"/> Access to Lab 2042	<input type="checkbox"/> Access to Lab 2052
<input type="checkbox"/> Access to Lab 2062	<input type="checkbox"/> Access to Lab 3042
<input type="checkbox"/> Access to Lab 3052	<input type="checkbox"/> Access to Lab 3062
<input type="checkbox"/> Access to Lab 4033	<input type="checkbox"/> Access to Lab 4042
<input type="checkbox"/> Access to Lab 4052	<input type="checkbox"/> Access to Clean Room (Corridor Door/Stairwell)
<input type="checkbox"/> After-hours access to MDRU Resource Centre	<input type="checkbox"/> Access to 5030 Suites
<input type="checkbox"/> After-hours access to Conference Centre	
<input type="checkbox"/> Other – please specify	

EOS Main

<input type="checkbox"/> Access to Front Door	<input type="checkbox"/> Access to Basement Door
---	--

Visitors Cards

(For Visitors requiring Card Key access who are not eligible to receive a UBC Card. A \$10 deposit is required.)

Visitor Start Date: _____	Visitor End Date: _____
---------------------------	-------------------------