|  |  |  |  |
| --- | --- | --- | --- |
| **VISITORS & SPECIAL EVENTS** (Multiple names on one form must all have identical access) | | | |
| **ADD ACCESS** | **EXTEND ACCESS** | **REMOVE ACCESS** | **DELETE KEY & PROFILE** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **GROUP OR EVENT** | | | | **NAME: KEY HOLDER** | | | | **DEPT OR SPONSOR** | | **KEY START DATE** | **KEY EXPIRY DATE** | **DAYS OF WEEK** | | | | | | | |
|  |  | | | |  | | | |  | | MM-DD-YYYY | MM-DD-YYYY | M | T | W | R | | F | S | S |
| 1 |  | | | |  | | | |  | |  |  |  |  |  |  | |  |  |  |
| 2 |  | | | |  | | | |  | |  |  |  |  |  |  | |  |  |  |
| 3 |  | | | |  | | | |  | |  |  |  |  |  |  | |  |  |  |
| 4 |  | | | |  | | | |  | |  |  |  |  |  |  | |  |  |  |
| 5 |  | | | |  | | | |  | |  |  |  |  |  |  | |  |  |  |
|  | **BUILDING NAME:** | | | | | | | | | | START DATE:  MM-DD-YYYY | EXPIRY DATE:  MM-DD-YYYY | 24 HRS | | | | 6AM  To  10PM | | | |
| 1 |  | | | | | | | |  | |  |  |  | | | |  | | | |
| 2 |  | | | | | | | |  | |  |  |  | | | |  | | | |
| 3 |  | | | | | | | |  | |  |  |  | | | |  | | | |
|  | **DOORS:** | | | | | | | | | | START DATE:  MM-DD-YYYY | EXPIRY DATE:  MM-DD-YYYY | 24 HRS | | | | 6AM  To  10PM | | | |
| **BLDG** | **ROOM NUMBERS** | | | | | | | | |
| 1 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 2 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 3 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 4 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 5 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 6 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 7 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 8 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 9 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |
| 10 |  |  |  |  | |  |  |  |  |  |  |  |  | | | |  | | | |

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| --- | --- |
| **Additional Info:** |  |

ACCESS REQUESTS MUST BE COMPLETED BY YOUR DEPT’S DESIGNATED SALTO APPROVER

|  |  |
| --- | --- |
| **DEPT APPROVER INFO:** |  |
| FIRST NAME: |  |
| LAST NAME: |  |
| DEPARTMENT: |  |
| EMAIL: |  |
| PHONE: |  |