

ADDITIONAL CARD ACCESS REQUEST FOR STUDENTS WITHIN COLLEGE / SCHOOL

***Request to Allow Perimeter Card Access for Students within College/School (Outside of M-F 7:30A-5:30P).

College/School can also grant selected interior card access to all students within College/School. Please email completed form to PublicSafetyCASS@fsu.edu ***

College/Sch	nool Name:						
Departmen	t/Division Na	me:					
Building(s)	Where Perim	eter Card A	ccess Should	Be Granted:			
Interior Spa	ace(s) Where	Card Access	s Should Be G	iranted (space	must be o	wned/shared	by College):
Dean, Direc	tor or Depart	ment Head	<u> </u>				
Name:							
Title:							
Phone:							
Email:							
Additional	Perimeter Acc	ess Reques	sted (Days an	d Times):			
DAY(S)	MON	TUES	WED	THURS	FRI	SAT	SUN
TIME(S)							
A alalisi a a l .		- D	d (Dames and)	T:			
	Interior Acces				- FDI		CLINI
DAY(S)	MON	TUES	WED	THURS	FRI	SAT	SUN
TIME(S)							
Lauthorize :	the implemen	tation of th	e card access	s schedule liste	ed above:		
	tire implemen			, sorredure list	a above.		
Dean, Direc	tor, Departme	ent Head					Date
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