# PRELIMINARY KEY REQUEST FORM

<table>
<thead>
<tr>
<th>Last Name:</th>
<th>Full Legal First Name and Middle Initial:</th>
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<tbody>
<tr>
<td>CSU ID Number:</td>
<td>Email:</td>
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<tr>
<td>Office Room Number:</td>
<td>Office Phone Number:</td>
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**Room Number of Metal Keys Requested:**

**Key Card Clearance(s) Requested:**

- [ ] Chemistry ARC B115 XRD **
- [ ] Chemistry ARC B2 600 NMR **
- [ ] Chemistry ARC Basement Main Lab **
- [ ] Chemistry ARC C3A Magnetic Properties Lab **
- [ ] Chemistry ARC C3E 500 NMR **
- [ ] Chemistry ARC C4 XPS/XRD Lab **
- [ ] Chemistry ARC-ISS Yates 101 **
- [ ] Chemistry Main Lobby Entry
- [ ] Other _____________________________
- [ ] Chemistry RB Building Entry
- [ ] Chemistry RB 1st Floor (includes RB Building Entry)
- [ ] Chemistry RB 2nd Floor (includes RB Building Entry)
- [ ] Chemistry RB 3rd Floor (includes RB Building Entry)
- [ ] Chemistry RB 4th Floor (includes RB Building Entry)
- [ ] Chemistry RB ARC 109 Main Lab*
- [ ] Chemistry RB ARC 204L SCXRD*
- [ ] Other _____________________________

**ARC STAFF APPROVAL IS REQUIRED FOR ALL ARC KEY CARD CLEARANCES PRIOR TO FORM SUBMISSION.**

**CSU Affiliation:**

- [ ] Faculty
  - [ ] Postdoc (if non-Chemistry) Department ________________________________
- [ ] Staff
  - [ ] Graduate Student (if non-Chemistry) Department ________________________________
  - [ ] Other Affiliation ________________________________

**KEY MANAGER APPROVAL**

**EMAIL FORM TO:** cindy.ungerman@colostate.edu