

University Affiliate Key/Card Holder Applicant Information

University Affiliate Key & Building Card Access Request Form

Submit completed forms to workcontrol@sjsu.edu

	ffiliate Last Name Af				me		Tower Card ID (if affiliate has on		
ııat	te Department /College/Compa	any			Affiliate Er	nail (Required)			
	Appropriate Administrator (AA)	or Sponsoring	SJSU Manager	Name	 S.	JSU AA or Sp	oonsoring SJSU Manager Towe	r card ID	
	est Type: Employee	Student	Aux	xiliary ployee	Contractor Vendor	.,	olunteer Other:		
ed	uest Type – Check all tha	at apply							
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╛	New Key New Card	Modified	Electronic Acces	s Plan	eplacement	Key/Card (Req	uires lost key form to be completed)		
ui	Iding Access — Fill out all	applicable fi	elds						
	onic Access Card Only			F	D&O Use Only	1			
	Electronic Access Group	OR Building	g Room#	Access Expiration Date	Date Returned /Deactivated	FD&O Initials	Space Resource Manager Approval (If space is managed by another department)	Key holder Initia (Upon issuance)	
y O	nlv			F	D&O Use Only	1			
, 0	Key Ring Group	OR Buildin	g Room#	Key Returned D		Initials	Space Resource Manager Approval	Key holder Initia	
							(If space is managed by another department)	(Upon issuance)	
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JSI	U Appropriate Adminis	trator or S	ponsoring	SJSU Mana	ager App	roval			
	U Appropriate Adminis						mation and approve issuance	of electronic	
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