

## Bowman Gray Campus Badge Access and Key Request Form

Please complete this form for badge/key access to the Bowman Gray Campus facilities.

Send completed form to [arpoffice@wakehealth.edu](mailto:arpoffice@wakehealth.edu) or fax to 336-713-7395.

NAME (as listed on your badge)    Badge ID (5 digit number that begins with an\*)    Protocol Number

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Department \_\_\_\_\_ Date \_\_\_\_\_

Signature of Principal Investigator \_\_\_\_\_

**Requesting Badge Access to:**

- |   |                                       |                   |
|---|---------------------------------------|-------------------|
| <input type="radio"/> Gray Building Animal Facility             | <input type="radio"/> Gray Sheep Area | Approved By _____ |
| <input type="radio"/> Hanes Building Animal Facility            | <input type="radio"/> Hanes Biohazard | Approved By _____ |
| <input type="radio"/> NRC 5 <sup>th</sup> Floor Animal Facility |                                       |                   |
| <input type="radio"/> NRC 6 <sup>th</sup> Floor Animal Facility | <input type="radio"/> NRC Barrier     |                   |

**Requesting Key to:** Room \_\_\_\_\_ of the \_\_\_\_\_ Building.

I will need this key for \_\_\_\_\_ months. Only one key per lab is issued. Keys that are lost may be replaced for a \$30 fee. If the Safety/Security Section of Risk Management determines a lock must be changed due to a lost key, the PI will be billed for this charge as well. Key related charges will be billed directly to the PI's next regular monthly bill.

Signature of Person Picking up Key \_\_\_\_\_

**You are responsible for returning this key when your study is complete.**

**Please note – Access will not be granted until this form has been submitted to the Bowman Gray Animal Resources Program (ARP) Operations Manager.**