

Student Access Request Form

Please Type or Print Sponsor Information (*Sponsor MUST be a KSU Employee*)

First: _____ Last: _____ KSU#: _____

School/Dept: _____ Phone: _____

Group Name/Affiliation: _____ Dept speed chart number* _____

Begin Service Date: ___/___/___ and End Service Date: ___/___/___ (*1 year max*)

Sponsors' Email: _____

First Name	MI	Last Name	KSU #

Is door/building/room access required for this individual? Yes No

Door and Building access requests must be made by contacting the locksmith.

Building access requested: _____

Is after-hours access required for this individual? Yes No

Positions of trust are those that involve interaction with children, master access to facilities, access to financial resources, including but not limited to Purchase Cards, delivery of patient care and have access to patient information or that have been otherwise identified by the hiring institution.

Is the nature of the position considered a position of trust? Yes No

Please see (http://www.usg.edu/hr/manual/background_investigation/) for BOR policy regarding background checks.

***if background check is required**

Dean/Director Approving this Request

Name (Please type or print): _____

Signature: _____ Date: _____

Title&School/dept: _____

Card Services use only: Newly assigned KSU# _____

Date background check completed ___/___/___

*Card Services Center • Carmichael Student Center • Suite 207 Mail Stop #0510 •
Phone: 770-499-3436 • Fax: 678-797-2077 • Email: IDServices@Kennesaw.edu*