



SUNY Polytechnic Institute  
100 Seymour Road  
Utica, New York 13502

**SUNY POLY CARD ACCESS REQUEST FORM  
AND  
LABORATORY USAGE AUTHORIZATION FORM**

Date Requested: \_\_\_\_\_

Issue Card Access to \_\_\_\_\_  
Last First M.I.

Requester's SUNY Poly card U number: \_\_\_\_\_ Prox #: \_\_\_\_\_  
(5 digit number on back of card preceded by asterisk)

My signature below acknowledges that the card access requested is for use only in the execution of responsibilities specific to and required in the performance of my academic/job duties. Misuse of card access is a violation of both SUNY Polytechnic Institute and SUNY System policy;

Requestor's signature: \_\_\_\_\_

Department: \_\_\_\_\_ Fac/Staff Student Other \_\_\_\_\_  
(Circle one)

Approved by: \_\_\_\_\_  
Supervisor's name typed or printed Supervisor's signature (stamp not acceptable)

Approved by: \_\_\_\_\_  
University Police/Chief of University Police

**AREA(S)/ROOM(S) REQUESTING CARD ACCESS TO:**

Actual door access to be determined by University Police

BUILDING	ROOM #	BEGIN DATE	END DATE	TIMES

(UP Dept. use only) Access Given by University Police:	Entered by: (initials)

**INFORM UNIVERSITY POLICE OF LOST SUNY POLY CARD IMMEDIATELY  
There is a charge for a lost card.**