

University of Hartford Building Access Request Agreement

Faculty and staff members whose duties require their extended presence in their assigned building may request to have after-hours access to the building in which their office or assigned work space is located. The request will be reviewed by their respective dean, director or administrative department head and approval will be based solely upon a proven need to have access to the building after it is closed.

Faculty and staff members who have been approved for after hour access are expected to adhere to the following regulations and restrictions:

1. Faculty and staff may not lend their University of Hartford identification card (access card) to any other person.
2. Under no circumstances will individuals be allowed to accompany the authorized faculty or staff member into the designated building unless notification is given to Public Safety prior to entry.
3. Any individual accompanying an authorized faculty or staff member will be required to remain in the presence of the authorized individual at all times.
4. Faculty or staff members authorized to enter a building after hours will be held accountable for securing the entrance door after they have gained access. Doors will not be propped open or otherwise compromised.
5. If the University is closed due to inclement weather or other emergency condition, the card access system will be disabled preventing anyone from entering secured buildings. University policy allows for general access one half hour prior to the start of classes. There will be no exception to this policy.
6. If a University of Hartford identification card (access card) is lost or stolen, Public Safety must be notified immediately of the loss or theft so the card can be disabled to prevent unauthorized use.
7. If access is approved, the dean, director or administrative department head will forward a copy of the approved BUILDING ACCESS REQUEST AGREEMENT to the ID Office located in Computer Center 117 at the Help Desk. The staff there will program the applicant's University of Hartford Identification card (access card) for access in accordance with the days and times noted on the Building Access Request Agreement.

I have read the BUILDING ACCESS REQUEST AGREEMENT and agree to abide by the regulations and restrictions outlined above. I understand that if I violate the terms of this agreement, my after-hours access privileges may be revoked.

Building: _____ Room #: _____ Approved days and times:* _____

Name of applicant (please print): _____

Signature: _____

Name of Dean, Director, or Administrative Department Head (please print): _____

Authorized signature: _____ Date: ____/____/____

***Unlimited access will not be approved.**