Pioneer Card System
Security Access Request
Rev: 070711

USER INFORMATION

NAME: __________________________ DU ID#: __________ PHONE: __________

EMAIL ADDRESS: __________________________

BANNER USERNAME: __________________________

DEPARTMENT: __________________________

JOB TITLE: __________________________

Please indicate the location you need to administer:

1. Do you need to grant entry access to a building?
   Building: __________________________
   Building: __________________________
   Building: __________________________

2. Do you need to grant entry access to a specific room?
   Room Name: __________________________ Building: __________________________
   Room Name: __________________________ Building: __________________________

3. Do you need to run location reports?
   Location: __________________________
   Location: __________________________

Additional information:
______________________________________________________________________________________________
______________________________________________________________________________________________

Form Prepared By: __________________________ Preparer’s Phone: __________ Fax: __________

APPROVING SIGNATURES

Comments:

Appropriate Security Classes:

1. Department Manager Date  2. Division Head/Budget Officer Date
3. ID Office (fax: 14662) Date  4. AIS (fax: 17998) Date

After obtaining all required signatures, please submit this form to the Pioneer ID Card Office for processing. The ID Office will then submit the form to Administrative Information Services (AIS).