

Faculty of Computer Science Supplementary Access Agreement

Student Information	
Student Name:	Student ID Number: B00
Program of Study:	Graduate: Undergraduate:
Access Requested	
Ped Number:	Floor: Room:
Ped Key Number:	Other:
Supervisor:	Supervisor's Signature:
	Date:
Access Card Number:	Access Level:
Card Condition:	
Payment	
Deposit Amount Received: \$	Receipt Number:
Date:	
Terms & Conditions Signed: Y N	Portal (<i>administrative use only</i>): Y N
Return of Key(s) & Access Card:	
Key(s):	Date:
Access Card Number:	Date:
	Condition:
Deposit Amount Returned: \$	Date:
	Completed By: