



Date:

## Department of Biomedical and Molecular Sciences Key and FOB Request Form

Please fill out the information below and return the hard copy with original signature to Botterell Hall, Room 563. Please ensure you bring all required forms with you when requesting building access (<https://dbms.queensu.ca/services/online-forms>).

Principal Investigator:

Supervisor Signature: \_\_\_\_\_

Name of Key Recipient:

Email Address:

Student/Staff #:

Category:

<input type="checkbox"/> Faculty	<input type="checkbox"/> Support Staff
<input type="checkbox"/> Post-doctoral Fellow	<input type="checkbox"/> Research Staff
<input type="checkbox"/> Graduate Student	<input type="checkbox"/> Project Student ( <b>D40 ONLY</b> )
<input type="checkbox"/> Co-op Student ( <b>D40 ONLY</b> )	<input type="checkbox"/> Casual Employee

(Volunteers and visitors are not entitled to keys)

Keys Requested:	Room#	Key#/FOB#	Code#	Room#	Key#/FOB#	Code#
1.	<input type="text"/>			5.	<input type="text"/>	
2.	<input type="text"/>			6.	<input type="text"/>	
3.	<input type="text"/>			7.	<input type="text"/>	
4.	<input type="text"/>			8.	<input type="text"/>	