

Facility Access Request

Section I: Individual Information

Name:		Banner ID:	
Email Address:			
Faculty	Staff	Student	Volunteer/Person of Interest

Section II: Principal Investigator/Supervisor Information

Name:		Email Address:	
Protocol #:		Department:	
Signature:			

Section III: Access Requested – Please check all locations for which access is needed

Main Facility Doors	Edstrom Animal Rooms
<input type="checkbox"/> BSE 3.300, 3.300A, 3.300-1	BSE:
<input type="checkbox"/> BSB 3.03.22, 3.03.22U	BSB:
<input type="checkbox"/> SRL 1.03, 1.03-1	SRL:

Section IV: Other Requirements (if handling animals)

AALAS Online Training Completed? Y N	Date Completed:
IACUC Approved? Y N	Approval Date:

Please submit completed forms via email to LARC@utsa.edu

LARC Admin Use Only

Access Requested:	Access Granted:
Edstrom Profile Created:	Edstrom PIN:
Completed On:	

NOTE: Please do not share your PIN with anyone. Sharing PINs compromises security of the facility and could be grounds for having access revoked.