McClelland Park Building Access Agreement

This form must be completed by the individual requesting access as well as their supervisor before access to McClelland Park is granted.

Terms:  
1) Individuals will be given access to exterior doors and the security levels in McClelland Park that they are working in. Access to additional levels require additional written requests and authorizations.

2) Individuals are responsible for securing the area they are granted access to, including making sure doors are not propped open after hours, and are closed and secured upon exit.

3) Access is granted solely to the individual below, and does not include anyone else who is unauthorized to be on the premises. Do not invite, have accompany, or let in anyone who is not authorized to be in McClelland Park.

4) Upon completion of affiliation with the Norton School, access will be removed.

5) It is the responsibility of the individual to obtain the proper CatCard technology on their card to access McClelland Park. If individuals do not have a CatCard that will allow them access, it is at the discretion of the Norton School Faculty/Staff authorizing this request to provide funding for a CatCard upgrade.

Failure to comply with any of the terms will result in immediate disabling of building access.

First Name: Last Name:

Email: ­

CatCard Number: 6017 0902 \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

Upon completion of processing, you will receive an email with instructions to choose a Personal Identification Number (PIN). Your PIN is a four digit number that must be provided by you, the user. The PIN is only necessary when entering the building after hours. The PIN is used via the exterior door readers after scanning your CatCard. This number is not needed for interior doors access.

I agree with all of the terms of the agreement stated above:

Signature: Date:

**Norton School Faculty/Staff authorizing this request:**

First Name: Last Name:

Signature: Date:

McClelland Park Room Number(s) you need access:

Access Expiration Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please turn completed form to: Robert Lanza, McClelland Park Room 401c Rev.7.31.18