

# CARD KEY ACCESS FORM TO GENERAL OLAC FACILITIES



**INSTRUCTIONS:** (Please **READ** carefully, as some of these instructions have changed):

The following must be completed, and this form submitted in person to Northwest Animal Facility (NAF 203)

### APPLICANT'S INFORMATION:

Applicant Name (Last, First): \_\_\_\_\_

CAL Student/Employee ID#: \_\_\_\_\_ Card Key# (1st 6 #'s on back of the card): \_\_\_\_\_

Applicants Email: \_\_\_\_\_ PI Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Check one of the selections below:*

Faculty    Staff    Post-Doc    Graduate Student    Undergraduate    Other: \_\_\_\_\_

Check Boxes After Completions: Signatures Required *	<b>REQUIREMENTS:</b>
Verification signature	Bring CAL ID and present for verification to the trainer with this form. <b>OBTAIN A CAL 1 ID CARD AND CALNET ID:</b> ( <a href="https://cal1card.berkeley.edu/">https://cal1card.berkeley.edu/</a> )
Signature and Date Req.*	<b>NAF/LKS FACILITY ORIENTATION (In-Person): Instructor's Signature/Date Required*</b> ( <a href="https://www.olac.berkeley.edu/training">https://www.olac.berkeley.edu/training</a> )
Signature and Date Req.*	<b>Minor Hall FACILITY ORIENTATION (In-Person): Instructor's Signature/Date Required*</b> ( <a href="https://www.olac.berkeley.edu/training">https://www.olac.berkeley.edu/training</a> )
Signature and Date Req.*	<b>Weill Hall FACILITY ORIENTATION (In-Person): Instructor's Signature/Date Required*</b> ( <a href="https://www.olac.berkeley.edu/training">https://www.olac.berkeley.edu/training</a> )
Signature and Date Req.*	<b>VLSB FACILITY ORIENTATION (In-Person): Instructor's Signature/Date Required*</b> ( <a href="https://www.olac.berkeley.edu/training">https://www.olac.berkeley.edu/training</a> )
	<b>COMPLETE RISK ASSESSMENT IN THE OCCUPATIONAL HEALTH SURVEILLANCE SYSTEM (OHSS) (Online):</b> ( <a href="https://ehs.ucop.edu/ohss">https://ehs.ucop.edu/ohss</a> & <a href="https://www.youtube.com/watch?v=xhlgSJq2zfs">https://www.youtube.com/watch?v=xhlgSJq2zfs</a> )

Check Box	Animal Facility Access Request
	NAF: Northwest Animal Facility
	LKS: Li Ka Shing and Room number _____
	Weill Hall 6 <sup>th</sup> Floor and Suite (list Suite #) _____
	Weill Hall Basement
	Minor Hall
	VLSB
	OLAC Staff

Activation dates from \_\_\_\_\_ to \_\_\_\_\_