



STAFF ACCESS

PLEASE PROVIDE THE INFORMATION BELOW AND SUBMIT THIS COMPLETED FORM TO THE MAINTENANCE DEPARTMENT

	Name:	Phone Number	••
BUILDING(S)	High School Junior High	Kreeger Smith Munn Bus G	arageMaintenance Central Office District
ROOM NUMB	ER		

CONTRACT TERMS:

- 1. User is required to make sure that the building is secure at all times. Doors should <u>never</u> be propped open. Please secure all doors and windows that you may have opened as you exit the building.
- 2. Facility use is limited to assigned employee and work area only. A facility request must be submitted through fowlervilleschools.gofmx.com whenever you request use of athletic facilities and other common elements of the building.
- 3. Never give your Access Badge to another individual. Access Badge is only to be used by the individual it is assigned to.
- 4.**If your Access Badge is lost or stolen, you must notify the Director of Maintenance <u>immediately</u>. A lost/stolen access badge compromises the security of the building.**
- 5.The user understands that the District may limit access to facilities at unspecified times for construction, maintenance, cleaning, etc.
- 6. Badge must be returned when you are no longer employed with Fowlerville Community Schools.
- 7. NEVER punch a hole in your badge. It will damage the badge.
- 8. **NEVER dispose of your access badge.** You will use the access badge every year. The access badge is different from your id badge. It has numbers on the backside.
- 9. There is a \$10.00 replacement cost for a new Access Badge.

I HAVE READ AND	AGREE TO	ABIDE BY	THE CO	ONTRACT '	TERMS.

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APPLICATION FOR ACCESS BADGE

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I HAVE READ AND AGREE TO ABIDE BY THE CONTRACT TERMS.

Signature:	 Date:

KEY ASSIGNMENT

I, the undersigned, acknowledge receipt of the keys designated below. I also agree not to loan, transfer, give possession of, misuse, make copies, modify or alter the following keys. Signature: Date: **DATE CHECKED OUT KEY (S) CHECKED OUT INITIAL DATE CHECKED IN KEY ASSIGNMENT** I, the undersigned, acknowledge receipt of the keys designated below. I also agree not to loan, transfer, give possession of, misuse, make copies, modify or alter the following keys. Signature: _____ Date: _____ **DATE CHECKED OUT INITIAL** KEY (S) CHECKED OUT **DATE CHECKED IN**