Contractor Company: \_\_\_\_\_

# **NIST & NTIA** ACCESS REQUEST FORM

NAME:	NIST/NTIA	MAIL CODE:		
ROOM/PHONE:				
ACTION (Check One):		REPLACE		
TYPE (Check One): RESEARCHER	FEDERAL EMPLOYEE		GUEST	
CITIZENSHIP (Check One):	UNITED STATES		AL)	
<b>DUTY HOURS (Check One):</b> BUSINESS HOURS (6:00 am to 6:00 pm) 24 HOUR ACCESS (If both Foreign National and 24 Hour Access is Checked, Complete Back of Form)				
PERIOD OF VISIT: From _		_ to		
USER GROUPS:				
BLDG. 1 (All exterior doors to Bldg. 1) BLDG. 22 (All exterior doors to Bldg. 22)   BLDG. 2 (All exterior doors to Bldg. 2) BLDG. 24 (All exterior doors to Bldg. 24)   BLDG. 4 (All exterior doors to Bldg. 4) BLDG. 25 (All exterior doors to Bldg. 25)   BLDG. 5 (All exterior doors to Bldg. 5) BLDG. 26 (All exterior doors to Bldg. 26)   NOAAEXT (After Hours Access to all exterior doors of the David Skaggs Bldg)*				
Interior Rooms to be Accessed:				

## \* JUSTIFICATION FOR AFTER HOURS ACCESS TO THE DAVID SKAGGS BLDG:

AUTHORIZING OFFICIAL:		
Name/Title:	Signature:	Date:

DATE: \_\_\_\_\_ MRSO SECURITY APPROVAL: [Conversional Conversion of the second states of the second states and the second states and the second states of the second states and the second states of the second states of the second states and the second states of the second states tates of the second

### **EMERGENCY CONTACT:**

NAME:	
	DAYTIME PHONE NUMBER:

### SIGNATURE:

This signature certifies that the above named Federal employee/Affiliate has received his/her PIN number/ID to access the exterior doors and if needed, access controlled, interior rooms at 325 Broadway, Boulder, Colorado. Federal employee/Affiliate agrees to keep his/her PIN number/ID confidential.