KEY/FOB AUTHORIZATION/RETURN FORM

PART I	APPLICANT INFORMATION
First Name	Juhita
Last Name	Dhar
Net ID	jdhar007
Job Title	Graduate Student Researcher
Email	juhita.dhar@email.ucr.edu

PART II	AUTHORIZING PI INFORMATION
First Name	Jason
Last Name	Stajich
Department	Microbiology and Plant Pathology
Email	jason.stajich@ucr.edu
Phone No.	9518272363
COA	1511-60604-A01094-XXXXX-43-000-0000000000-0000000000-F0009764

PART III	REQUESTED ACCESS		
Authorization Type	☒New	☐ Replacement	☐ Additional Access
Genomics Building Access	☒Lobby (Fob)	☒ Lab (Fob): __1219B__	☐ Room (Key): _____

Keen Hall Access *(Additional Signatures Required)*

☒Genomics Core		☐ Chemical Screening	
	Dr. Wei Zhang (Signature)		*Dr. Wei Zhang (Signature)*
☐ Proteomics Core		☒Microscopy Core	
	Dr. Quanqing Zhang (Signature)		*Dr. David Carter (Signature)*

PART IV	DETAILS AND ACKNOWLEDGEMENTS

Receipt of Keys/Fobs

Applicants will receive an email notification when their keys or fobs are ready for pickup from the Genomics 1206 office. When collecting their key(s) or fob, applicants must present valid identification and proof of completed safety training.

User and Principal Investigator Responsibilities

Once a key or fob is issued, the applicant assumes full responsibility for its use. Users are prohibited from lending their access to others. Both users and their Principal Investigators (PIs) are required to notify IIGB administrative staff immediately if a key or fob is lost. Failure to report immediately may result in accountability for any unauthorized access, property damage, or theft associated with your key or fob. Access privileges may be revoked in the event of misuse. The authorizing PI will be charged for the replacement of lost keys, fobs, or affected door hardware. Replacement costs will be determined by facilities services at the time the service is rendered.

Renewal

Access provisions are renewed annually by the IIGB administrative office, with renewals taking place on September 30th each year. Administrative staff will reach out to authorizing PIs to confirm which researchers in their lab require access renewal. Keys or fobs that are not returned will be considered lost and will incur charges to the authorizing PI, as outlined above.

Continuation See Page 2

Continuation: Details and Acknowledgement

Form Submission Process
To submit this form, please email it to **IIGBstudent@ucr.edu and/or iigbadmin@ucr.edu.** Requests will be processed within **1-2 business days.**

Key Returns
Upon the completion of your assignment, employment, or project, your keys must be returned. To begin this process, please email iigbadmin@ucr.edu so that we can send you the original key/fob form for you to complete and sign. The signed form should be returned digitally, along with your physical keys, to the IIGB office.
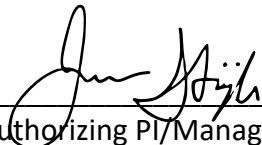
PART V	PI ACKNOWLEDGEMENTS

The authorizing Principal Investigator (PI) acknowledges the following:

- The listed applicant is granted permission to access their laboratory in the Genomics Building and any additional areas specified in this form.
- The applicant has completed laboratory safety orientation training, laboratory-specific training, and any other courses identified by the UCR EH&S training needs assessment.
- The applicant has reviewed the Genomics Building Emergency Plan as detailed below:
  https://drive.google.com/file/d/15VAzpMAokRTtPelJe1Gy1t2nK2tAtqD-/view

_____
Authorizing PI/Manager

_____
Other Authorizing PI/Manager
(For Multiple Lab Access)

PART VI (A) APPLICANT SIGNATURE (ISSUANCE)	PART VI (B) APPLICANT SIGNATURE (RETURN)

PART VI (A) APPLICANT SIGNATURE (ISSUANCE)

- By signing this form, I agree to follow all security protocols and guidelines related to key use and access.
- In the event the key is lost, stolen, or damaged, I will immediately notify the IIGB Office (iigbadmin@ucr.edu).

Signature: _____

Date: ___03/12/25_____

PART VI (B) APPLICANT SIGNATURE (RETURN)

- By signing below, the user confirms that all keys and fobs listed above have been returned in good condition.
- Please list the keys and fobs being returned:

Key/Fob	Description

Signature: _____

Date: _____

IIGB-CEPCEB USE ONLY	
Key/Fob Issuance Details	
Issued by:	**Date:**
Key/Fob Return Details	
Received by:	**Date:**