



Springfield Technical Community College Police Department

Non Emergency Calls (413) 755-4220
Emergency Calls (413) 755 - 3911
Building 9
1 Armory Sq.
Springfield, Ma 01102

ACCESS CARD REQUEST FORM

Directions

1. Complete Steps 1 to 4 on this page.

2. Return or send this form, with all necessary signatures, to the STCC Police .

STEP 1 - Name of Requestor

Please Print name as how it will appear on card:

Name:

Department:

Date:

Extension:

STEP 2 - POSITION (Check One)

☐ FACULTY

☐ STAFF

☐ STUDENT

STEP 3 - Division Head / Director Signature

Name:

Date

Print name:

STEP 4 - Areas where access is needed

In the space below, please state the areas where access is needed.

Building(s) Room #(s) and Areas

Building(s)	Room # (s)	Areas

RECIPIENTS AGREEMENT

In consideration of receiving possession of the below listed access card, I agree to take diligent care of the card issued to me and to immediately report to my immediate supervisor and the Campus Police Dept. any loss thereof. I further agree not to give possession of the card to any person nor allow its use by anyone other than myself. I also understand that violation of this agreement may result in disciplinary action up to and including termination, resulting from willful or malicious violation of this agreement, and I may be held liable for costs associated with replacement of the card or other damages resulting from willful or malicious violation of this agreement.

RECIPIENTS SIGNATURE _____

Date Issued

Card ID #