GEOGRAPHY DEPARTMENT
CLASSROOM / COMPUTER LAB ACCESS APPLICATION

The following is to be completed by the student/employee (type or print legibly):

Last name: ___________________ First name: ___________________ Middle initial: ______

PERM/EMP ID#: ___________________

UCSB Email Address: ___________________ Phone Number: ___________________

Affiliation: ☐ Undergraduate ☐ Graduate Student ☐ Faculty ☐ Visitor/Post Doc

GEOG course # that you need computer lab access for: ______________________________

Terms of Use: Classroom and Lab use is for UCSB Geography department related work/purposes only. Access is granted via use of applicant’s UCSB ID card. NO food or drinks allowed in computer labs.

I hereby certify that the above information is true and correct, and I will abide by the terms of use.

Applicant signature ___________________ Date signed ______________

For department use only; Do not write below this line:
_____________________________________________________________

The above applicant in entitled to access the following locations via electronic means:

_________________________________________ _________________________________________

_________________________________________ _________________________________________

_________________________________________ _________________________________________

Department Authorization printed name: Consuelo Rivera/Patty Murray

Department Access Controller Signature: _______________________________