

CARD KEY FORM FOR GENERAL ACCESS TO OLAC FACILITIES

INSTRUCTIONS *(Please read carefully, as some of these instructions have changed):*

The following must be completed and this form submitted in person to North Animal Facility (NAF 203)

Check Boxes After Completions: <i>Signatures Required *</i>	REQUIREMENTS:
Bring ID card in with this form	OBTAIN A CAL 1 ID CARD AND CALNET ID: (https://cal1card.berkeley.edu/)
	COMPLETE RISK ASSESSMENT IN THE OCCUPATIONAL HEALTH SURVEILLANCE SYSTEM (OHSS) (Online): (https://ehs.ucop.edu/ohss & https://www.youtube.com/watch?v=xhlqSJq2zfs)
	CITI TRAINING (Online): “Working with the IACUC” (http://acuc.berkeley.edu/citi_guide.pdf)
Attach a printout	EHS 205: SAFETY AND CARE OF RESEARCH ANIMALS AT UC BERKELEY (Online): (https://jwas.ehs.berkeley.edu/lmsi/?searchText=ehs%20205)
Signature and Date Req.*	FACILITY ORIENTATION (In-Person): <i>Instructor’s Signature/Date Required*</i> (https://www.olac.berkeley.edu/training)
Signature and Date Req.*	PRINCIPAL INVESTIGATOR AUTHORIZATION: <i>PI Signature/Date and Activation Dates Required*</i> <i>Activation Dates: From _____ To _____</i>
Attach a printout of the dashboard from your AUP	ADDED TO ANIMAL USE PROTOCOL (http://acuc.berkeley.edu/protocol_guides/facility_access.pdf)
Fill out the Restricted Access Form	FOR ADDITIONAL ACCESS TO RESTRICTED AREAS (High Barrier, ABSL2, ABSL3, NHP, and Bat Areas):

APPLICANT’S INFORMATION

Applicant Name (Last, First): _____

Check one of the selections below:

Faculty Staff **Student/Employee ID#:** _____

Post-Doc Graduate Student Undergrad Student Other: _____

Card Key# (from the backside of the card): _____

Job Title: _____

Email Address: _____

Phone: _____

Principal Investigator Name: _____

Applicant Signature: _____ **Date:** _____

Check box	Animal Facilities Access Request
	NAF: Northwest Animal Facility
	LKS: Li Ka Shing and Room number _____
	WH-6: Weill Hall 6 th Floor and Suite (list suite number) _____
	WH-B: Weill Hall Basement
	Minor Hall
	Other: