

# ETSU Off-Site Facilities Onity Door Access Authorization Form

3/2024

Please grant access to:

Name	ID #	Expiration Date (required)	Faculty/Staff/Student
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Check the user group to which the above individual should be assigned.  
You may request assignment to only those doors to which you have the authority to authorize access.

## Baseball Stadium

Athletics Staff

## Community Health Clinic

CHC Administrative Staff  
CHC Allied Clinical Staff  
CHC Clinical Staff  
CHC Clerical Staff  
CHC Pharmacy Staff/Nursing Students  
CHC Facility Management Staff  
CHC ITS Staff

## Nave Center

Nave Staff  
Audiology Students  
SLP Students

## JC Day Center

JC Day Center Staff

Authorized By (print or type)

Signature

Phone #

Department

Position Title

Date