Lab Key Request Form
Department of Chemistry and Biochemistry

Date:

Requestor's Name: (print)

Requestor's status: Undergraduate
Graduate Student
Post-doctoral Researcher
Visiting Scholar
Other (explain)

Principal Investigator/Faculty Advisor:

Requestor's ND ID# (on front of ID card):

Requestor's NetID:

Room(s) requiring keys (specify Nieuwland or Stepan):

Requestor's signature:

PI/Advisor signature:

Return to:
Dawn Verleye, 149E Stepan
Campus phone: 631-7841
E-mail: dverleye@nd.edu

Copy of Notre Dame ID Card, Safety Compliance Form & ComplyND Certificate required □