Please email completed form to rmadison007@berkeley.edu

ALARMS & ACCESS CONTROL UNIT

University of California Police Department

CADO 4 (10002



(510) 643-9375

CARDKEY APPLICATION

Last Name, First The Wee, Ng	Bldg Etcheverry nd/or Hesse
Access (Building, Room #s) Reques	ted: Hesse Front Doors Etcheverry Front Doors
E-mail Address: ngzhe Wee @ berkeley	edu Work Phone: 8586251251
☐ Faculty (No fee) ☐ Staff (No f☐ Graduate ☐ Undergrad	Cal ID #: 50590985 0
☐ Other (PostDoc, VS, VSR, VIF) Authorization Signature and Date:	Access Expiration Date: June 1, 2025
	Professor Alice M Agogino

I understand and agree that the cardkey issued upon approval of this request is the property of the Regents of the University of California and

- that the cardkey will be returned upon request or at the time of separation from UC employment a)
- that I will report it's loss or theft to the University Police Department and to the issuing b) department as soon as such loss or theft is noted, and
- that the cardkey is issued for my exclusive use and may not be duplicated, loaned or used to c) allow any unauthorized person into a controlled area.

I further understand and agree that my full cooperation will be expected during any investigation concerning a security matter which might have occurred in a controlled facility during a time when my presence in the facility has been recorded by the system.

Abuse of the cardkey privilege and/or non-compliance with this agreement is a violation of Penal code 469, and may result in the revocation of cardkey use and/or disciplinary or criminal action.

The Wee Ng

Feb 3,2025

Cardholder's Signature

ATTN: Visiting Scholars, Visiting Student Researchers and Visiting Industrial Fellows, please bring completed form