**NOTE: Please send only one request for one individual per email to** **ictasbld@vt.edu****.**

**USER ACCESS INFORMATION**

**FIRST & LAST NAME:**

**VT EMAIL**:

**UNIVERSITY STATUS** (Faculty, Staff, Post Doc, Grad Student, Undergrad Student, Visiting Scholar, Volunteer, etc.):

**ACCESS HOURS** (8-5, M-F; 24x7) - NOTE: Undergrad Access Limited to 8-5. M-F unless in a paid position):

**ACCESS EXPIRATION DATE** **(MM/DD/YYYY):**

**SPECIAL REQUEST:**

**TYPE OF ACCESS** (Building, Desk, Both):

**BUILDING** (Kelly, ICTAS II, NCFL, Drone Park):

**RESEARCH GROUP:**

**PI/SUPERVISOR NAME:**

**PI/SUPERVISOR EMAIL:**