



# Student Permit to Enter Building

Department of Public Safety

This is the only form that will be accepted for access to the building as listed below.

Name(s) *type or print*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please permit the above named into \_\_\_\_\_ Building on \_\_\_\_\_  
*(print or type)* *(day or days of week)*

Date(s) \_\_\_\_\_ to \_\_\_\_\_ Time(s) \_\_\_\_\_ a.m. / p.m. to \_\_\_\_\_ a.m. / p.m.  
*(enter)* *(leave)*

Admit into the following rooms only \_\_\_\_\_

Department \_\_\_\_\_ *Faculty / staff signature*

Telephone number \_\_\_\_\_ *Faculty / staff name printed*

I understand and agree that in order to gain access into the above named building, I must display this permit and my CCU photo identification to a member of Coastal Carolina University's Department of Public Safety. I also understand and agree that if I depart the building before the scheduled time, I will notify the Department of Public Safety or the campus dispatcher at 843-349-2177 in order that the building may be properly secured.

Thank you for your cooperation on behalf of campus safety.

Student signature(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Time admitted \_\_\_\_\_ a.m. / p.m. Officer \_\_\_\_\_

Comments: