

VIP Guest Facility Access Request Form

Instruction: Please complete this form digitally or print and fill out manually. All fields must be completed prior to submitting to security.

1. VIP Guest Information

Salutation (e.g., Hon./Dr./Mr./Ms.):

Full Name of Guest:

Organization / Affiliation:

Official Title / Position:

Contact Phone Number:

2. Host / Sponsor Information

Sponsor Name:

Department / Division:

Sponsor Contact Number:

Sponsor Email Address:

3. Access Requirements & Visit Details

Date of Visit (YYYY-MM-DD):

Estimated Arrival Time:

Estimated Departure Time:

Building / Facility Name:

Specific Rooms / Zones to Access:

Escort Required? (Yes / No):

Designated Escort Name:

Purpose of Visit:

Special Requirements / Security Clearance Needs:

4. Approvals and Signatures

Note: This section is for handwritten signatures upon printing.

Sponsor Signature: Date:

Security Manager Signature: Date:

Facility Director Approval: Date: