

Emergency Visitor Security Authorization Form

INSTRUCTIONS: This form must be completed in full for all emergency visitors requiring immediate access to secured areas. Print the completed form, obtain the necessary physical signatures, and present it to the Security Desk upon arrival.

1. Visitor Personal Information

Last Name: First Name:
Company/Organization: Contact Phone Number:
Government ID / Passport Number:

2. Emergency Access Details

Reason for Emergency Entry:
Specific Area/Room to Access: Designated Escort Name:
Expected Duration of Visit:

3. Authorization & Approvals

To be completed by the authorizing manager or department head prior to security clearance.

Authorizing Officer Name: Title/Department:
Authorizer Phone Number: Date of Authorization:
Authorizer Signature:

4. Security Desk Checkpoint Verification

For Security Personnel Use Only.

Verifying Security Officer Name: Temporary Badge Number Issued:
Exact Time of Entry: Exact Time of Departure:
Security Officer Signature: