

SECURITY CARD ACCESS SYSTEM SLUCARD

Scott Hall is open for business Monday-Thursday, 8:30 a.m.- 6:30 p.m. and Friday, 8:30 a.m.-5 p.m. All visitors must check in at the reception desk in the first floor lobby to obtain a visitor's badge. All members of the SLU LAW and SLU community (students, faculty and staff) must present their University ID upon entering. There is no public access available on the weekends.

Individuals who are not currently associated with Saint Louis University, i.e., alumni, faculty, WU Law students, or special guests, may request access to Scott Hall for evenings and weekends, but will need to have a SLUcard to gain access. These cards are free and can be obtained by completing the form below. The form can be emailed to IDphoto@law.slu.edu. The form can also be returned to Saint Louis University School of Law, 100 N. Tucker Blvd., St. Louis, MO 63101-1930 Attn: Julie Orr.

Once approved, your card must be picked up, in person, at Parking and Card Services, DuBourg Hall, Room 33. Your picture will be taken and a photo ID will be prepared while you wait. Please allow 5-10 working days for your card to be processed. See their website for hours and location. There is a \$25 fee for a replacement card (lost/stolen). Damaged cards that are returned are replaced at no charge. Card access to the School of Law is available at the 100 N. Tucker entrance. Guest cards will be valid for a limited time based on the nature of the request.

 FOR MORE INFORMATION, CONTACT JULIE ORR AT JORR5@SLU.EDU OR (314) 977-7074.

SAINT LOUIS UNIVERSITY SCHOOL OF LAW ID CARD REQUEST FORM APPLICANT TO COMPLETE

CARD TYPE (check one): 1ST CARD LOST/STOLEN DAMAGED INFORMATION CHANGE

CLASSIFICATION (check one): ALUMNI

SPECIAL GUEST: (ATTORNEY WU LAW STUDENT NON-SLU FACULTY)

APPLICANT'S NAME: _____ DATE OF BIRTH: _____

ACADEMIC INSTITUTION (if applicable): _____ GRADUATION YEAR (if applicable): _____

ADDRESS: _____

PHONE: _____ E-MAIL: _____

REASON FOR REQUEST: _____

SIGNATURE* _____ DATE: _____

* I certify that the information I have provided is correct and agree to notify Parking and Card Services immediately should this card become lost or stolen. I understand that any misuse of the SLUcard including making it available to any other person, could result in revocation of access privileges.

SCHOOL OF LAW TO COMPLETE

APPROVED CLASSIFICATION (check one): ALUMNI GUEST

ID#: _____ EXPIRATION DATE: _____

APPROVED BY* _____ DATE: _____

* I certify that the information provided is correct and have verified that the person listed is entitled to receive this identification card. I will notify Parking and Card Services if the status of the applicant changes such that this person is no longer entitled to the use of this SLUcard and the privileges associated with it.