

**Franklin County Courthouse Facilities**  
**Request for Security Access Card**

**General Information:**

Name: \_\_\_\_\_  
*Last* *First* *MI*

Date of Birth: \_\_\_\_\_ Hire Date: \_\_\_\_\_

Department: \_\_\_\_\_ Job Title: \_\_\_\_\_

Employer (if not county): \_\_\_\_\_

Employer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Ext. \_\_\_\_\_ email: \_\_\_\_\_

**Classification of Individual:**

- County Employee  Contracted Service Provider  
 Temporary or Visitor (explain need below)  Other (explain below)

**Access Level Requested:**

- Employee gates  Exterior building doors  
 Other (describe below)

**Access Authorized by:**

Department Head or Elected Official (or designee)

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**Access Request Reviewed:**

\_\_\_\_\_  
*Signature of Security Administrator*

\_\_\_\_\_  
*Date*

**Note:** Appropriate background checks may be done based on access level requested.