

Student Access – Entry into BCM Main Campus

Name of Student: _____ Student ID _____

Cell number: _____ Program: _____

Requested Date of Entry: _____

Faculty/Person you will be meeting with: _____

Location (Building and Room#): _____

Purpose of Visit to BCM Main Campus:

Thesis Advisory Committee Meeting

Qualifying Exam

Thesis Defense

Graduation

Meet with Graduate School Dean

Meet with Program Director

Meet with Program Administrator

Other, please specify: _____

Additional Questions:

Anticipated duration of Education/GSBS activity on campus: _____ (e.g. 30 min, 2 hr.)

Will you also access your research laboratory on the same day: ___ Yes ___ No

If yes, PI of research laboratory: _____ Department: _____

Request must be submitted to GSBS-help@bcm.edu by 2:00 p.m. at least one day in advance of the requested access date. Please contact Jeanette Wiley @ jwiley@bcm.edu or GSBS-Help@bcm.edu for questions.