



Office of the Registrar

1903 W. Michigan Avenue  
Kalamazoo, MI 49008-5256  
(269) 387-4300  
wmich.edu/registrar

# Building Access Affiliate Request

Please complete the following information for building access.

Please print:

Affiliate Name: (Please include your middle initial)			
WIN:			
Affiliate Start Date:		Affiliate End Date:	
Next Enrollment Date:	<input type="checkbox"/> Fall	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer I <input type="checkbox"/> Summer II    Year: _____
Specify building and reason for access:			

Sponsoring Department:	
Sponsoring Faculty/Staff Member:	
Contact Name:	
Contact Email Address:	
Contact Telephone Number:	

Sponsor signature: \_\_\_\_\_ Date: \_\_\_\_\_

Affiliate signature: \_\_\_\_\_ Date: \_\_\_\_\_

Submit the completed form to:

Jim Bronson  
james.r.bronson@wmich.edu

Office of the Registrar  
Western Michigan University  
1903 W. Michigan Avenue  
Kalamazoo, MI 49008-5256