



Non-Paid Affiliate (NPA)/Long-Term Visitor (LTV) Form

INSTRUCTIONS

- The KSU Sponsor should submit this signed form to HR via Ricoh Scan Folder “#LTV” or in person.
- Forms are NOT accepted directly from the visitor.
- All Non-Paid Affiliates and Long Term Visitors are required to pay for campus parking.
- Original signatures by the KSU Approver are required and signature stamps are not accepted.
- **PLEASE NOTE:** If access is required for 4 days or less, DO NOT use this form.

KSU SPONSOR INFORMATION

First Name:	MI:	Last Name:
Sponsor Email:		Sponsor KSU #:
Department Name:		Department Speed Chart Number: <small>(Background checks will be charged to this account)</small>

NPA/LTV INFORMATION

First Name:	MI:	Last Name:
Date of Birth:	Emergency Contact Name: Emergency Contact Phone:	
Access Start Date:	Access End Date:	

Visitor Affiliation or Company/Organization Name: _____

Has this individual ever been a student, employee, or long-term visitor? If “Yes”, please provide the previously issued KSU Number (if known):	Yes	No
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ACCESS SELECTION

Does this individual require access to Enterprise Systems such as email, Banner, NetID, etc?	Yes	No
Does this individual require access to buildings after normal business hours (after 5pm M-F and holidays)?	Yes	No
Does this individual require key/card access to buildings/rooms/doors? If “Yes”, please complete the following: Building Name: _____ Room Numbers: _____ Building Name: _____ Room Numbers: _____ Building Name: _____ Room Numbers: _____	Yes	No
Will this individual be in a position/role at KSU that is considered a “position of trust”? <small>(Includes interaction with children, master access to facilities, access to financial resources, delivery of patient care, access to patient information)</small>	Yes	No
Will this individual need access to secure area, information, or services?	Yes	No

APPROVAL

By signing this request for access to KSU facilities or services, I understand and agree that my department and/or the designated KSU sponsor noted above is responsible for:

- Coordinating the completion of the background investigation form and submitting it to Human Resources
- Covering the costs associated with obtaining a background check
- Ensuring that visitor or sponsor’s department has arranged to pay for campus parking
- Returning the issued KSU ID Card and Parking Pass (if applicable) to card services upon the NPA/LTV’s departure

Dean/Department Head Printed Name:	Dean/Department Head Signature:	Date Signed:
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<u>HR Use Only:</u>	LTV	NPA		<u>HR Approval Signature:</u>
Approved?	Yes	No		
Comments:				
<u>Card Services Use Only:</u>	New KSU # (if applicable):			