

**Request for Temporary IT Lab Use
School of Information Technology
Illinois State University**

This form is to be used for permission to enter the lab on a temporary basis for students not registered for any course work due to the following conditions.

Conditions:

The student has completed all course work required for the degree.

AND

Prior to the current semester, the student has registered for 6 hours of IT 494.

OR

The student has registered for IT 494 or IT 499 hours after lab passes have been run for the current semester.

Date: _____ **Semester Applying For:** _____

Student Name: _____

Student UID #: _____

Project/Thesis Committee Chair Name _____

I, as the IT graduate advisor, have confirmed that this student meets the above conditions and is in need of a lab pass for the current semester.

Graduate Advisor Signature: _____
Date

Student Signature: _____
Date

Please turn this completed form in to Jolene McDowell in OU 126.