

**St. Mary's College of Maryland**  
**MWR ACCESS REQUEST**

*(If access request is for the spouse of an SMCM employee, both employee and spouse sections must be completed)*

**EMPLOYEE INFORMATION:**

Employee Name: \_\_\_\_\_  
*(First, Middle, Last)*

Position Title: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
*(Month, Day, Year) (City and State)*

Birth Country: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Home Address: \_\_\_\_\_  
*(Street/City/State/Zip Code)*

**SPOUSE INFORMATION:**

Name: \_\_\_\_\_  
*(First, Middle, Last)*

Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
*(Month, Day, Year) (City and State)*

Birth Country: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Home Address: \_\_\_\_\_  
*(Street/City/State/Zip Code)*

I (employee/spouse) authorize St. Mary's College of Maryland to release the above information to the base security office for the purpose of obtaining a picture identification badge so I may gain access to the Patuxent River Naval Air Station. I understand that guests and other family members (other than the spouse) are authorized access, but only when specifically accompanied by the college employee. The spouse of an employee is not authorized to sponsor guests. Access is for the purpose of using an MWR facility or program.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse Signature (if applicable)

\_\_\_\_\_  
Date