

HARVARD LAW SCHOOL

Nursing Rooms Registration

Information

Name: _____

HUID: _____ Date: _____

Phone Number: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Requested Duration of Use: _____

Nursing Rooms User Agreement

The nursing rooms are located in Areeda 121 and WCC B003. Upon approval from the Dean of Students Office, you will have access to the nursing rooms with your HUID. The nursing rooms are open during regular building hours and are not available when buildings are closed. The nursing rooms are for your use only; you should not provide anyone else with access to these rooms.

Guest Signature

By signing this document, I am acknowledging that I have read and agree to the nursing rooms user agreement.

Guest's Signature: _____ Date: _____

Guest's Name (Printed): _____

Submission

Please submit completed forms to the *Harvard Law School Dean of Students Office*.

Address: 1585 Massachusetts Ave, Suite 3039, Cambridge, MA 02138

Fax: 617-496-0544

Email: dos@law.harvard.edu