RHODES COLLEGE  
DEPARTMENT OF MUSIC  
Hassell Hall Internal Access Contract

TO: Students needing internal access privileges to rooms with keypad locks in Hassell Hall  
FROM: William Skoog, Chair

As you know, the Department of Music maintains valuable equipment in various studios and classrooms; thus security is a critical issue. Therefore, we ask that you sign the following pledge indicating your understanding and acceptance of the responsibility that accompanies the privilege of being able to enter these rooms at will.

1. I understand that I may enter this room only at the times I have reserved it through the Music Office. I may not admit any persons other than those for whom the room has been reserved.

B. For students using rooms 100, 105, 201, 203, 211, or Evergreen 205 for individual practice:

1. I understand that I may use this studio for my personal practice only and may not allow other persons into the room with me at any time.

2. I understand that I may use musical instruments and stands only, and not any other equipment, such as telephones (except in an emergency), tape/CD players, or people’s personal property. In studios 203, the computer may be used ONLY for work with the Smart Music software. I am NOT allowed to read email or do other tasks on the computers.

C. For students in all rooms:

1. I understand that I am responsible for closing windows and turning out lights before I leave the room.

2. I UNDERSTAND THAT I MAY NOT GIVE THE KEY PAD COMBINATION TO ANY OTHER PERSON FOR ANY REASON AND THAT TO DO SO IS AN INFRACTION OF THE RHODES HONOR CODE.

I pledge to obey the above rules as the condition of my being allowed the privilege of having access privileges to this room, and I understand that disobeying the rules will result in the revoking of my privileges.

Name (printed) ________________________________ Room______________________
Signature ___________________________________ Date_____________________

The above-named student has my permission to be granted the access code for Room(s) [circle all that apply]:  100 105 112 201 203 211 Evergreen 205

Faculty Member (printed name):_____________________________ DATE: __________

Approval Signature: ________________________________