

Request for Lactation Room Access

Date of Request	
Employee Name	
WIU ID Number	
Department	
Daytime Contact Phone	
Email Address	
Start Date for Access*	
Desired Lactation Room**	

*This form registers you for **one year** of lactation room access. Should you need access beyond one year, please contact the Office of Equal Opportunity and Access to extend your request.

**If the nature of your job makes access to multiple lactation rooms necessary, please consult with the Office of Equal Opportunity and Access so they can best accommodate your needs.

Please send copy to the Office of Equal Opportunity and Access in Sherman Hall 203. For questions call (309) 298-1977.

Equal Opportunity and Access will forward to:

- Supervisor/chair of employee
- Room contact person (often the building representative) for desired lactation room
- Campus Security (if key is needed)