

Illinois State University
Department of Agriculture
University Farm

Visitor Pass

In accordance with biosecurity measures to prohibit the introduction of undesirable pathogens to our livestock herds, we request the following information be furnished.

Name _____

Address _____

City _____ State _____ Zip _____

(Date)

I have not been out of the United States within the past 14 days. No immediate family member(s) with whom I have direct contact has been out of the United States within the past 14 days.

(Signature of Visitor or Parent/Guardian)