

Key Request	ed/Approved By	y (Department I	Head / Chair)	
Key Authoriz	zed By (Presiden	nt / Vice Presiden	t)	
Date Request	ted		_	
Applicant's 1	Name (Last, First,	Middle) <b>Print</b> _		
[] Faculty [] Staff [] Stud			[] Permanent [] Temporary Start date	End date
Room #	Room #	Room #	Room #	Room #
Key Type	Key Type	Key Type	Key Type	Key Type
Key Code	Key Code	Key Code	Key Code	_ Key Code
posses 3. I will in and m 4. If the fee at t 5. In the Physic	sion by anyone elstreport loss, theft, by supervisor. key(s) become loss \$50.00 per key an case of resignational Plant.	se. or destruction of t, stolen, or not a d /or the cost for n, retirement, or	t duplicate, loan, exchange, key(s) immediately to Publicately for return, I will pare re-keying all affected locks termination of employmen	lic Safety, Physical Plant, ay the key replacement s. It I will return all keys to
	ed			
ALL KEYS	MUST BE TU	RNED IN TO	THE PHYSICAL PLA	ANT
Person Retur	ning Key (Last, 1	First, Middle) <b>Pr</b>	rint	
Date Returne	Person Returnir ed	1 <u>g</u>		
Key Type Returned			Building	
Key Code Returned			Department	