

# KEY REQUEST FORM

ONE FORM PER KEY REQUEST

Key Number

BANNER ID

EXTENSION:

DEPARTMENT:

Justification:

Faculty  
 Staff

FULL-TIME  
 PART-TIME

Print Name

Requestor Signature:

DATE:   
CAMPUS:   
BUILDING:   
ROOM:

## AUTHORIZATIONS - SEE BELOW\*

DEPARTMENT CHAIR:

DEAN:

VICE PRESIDENT:

DISTRICT DIRECTOR:

COLLEGE PRESIDENT:

## FOR MASTER KEYS AND GGM KEYS ONLY

ASSOCIATE VICE CHANCELLOR OF FACILITIES OPERATIONS:

COLLEGE PRESIDENT:

RECEIVED BY:

DATE:

## KEY ISSUE PROCEDURES

All keys will be requested on a key issue form properly signed. A clear, concise justification shall be provided in the space allocated on the form. Keys will not be issued to work studies, student assistants, temporary employees, or contractors. However, they will be issued to adjunct faculty.

### TYPE OF KEY

Individual Room Key

Department Master Key

Building Master Key

Campus Grand Master Key

### APPROVAL\*

Department Chairperson or District Director

Dean and College Vice-President

College President and Associate Vice Chancellor. The issue of this key shall be restricted to those with a valid "need-to-have" justification.

College President and Associate Vice Chancellor. The issue of this key shall be severely restricted.