

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

APPROVAL*

Individual Room Key

Department Chairperson or District Director

Department Master Key

Dean and College Vice-President

Building Master Key

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

Campus Grand Master Key

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