

# Faculty/Staff Key Request

Fill in the requested information, print and obtain authorized approving official's signature. [Bring the signed form and your ID Card to Facilities Management.](#) Facilities Management is open Monday thru Friday 7:00 am – 3:30 am.

Requester Name

Employee ID

Department

Key Holder Signature

Key(s) Requested

Building	Room#	Type of Key	Expiration Date	Until Separation	Initial after key is received
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	

Requester has read and agreed to the C. College key policy and procedure

Email of Approving Official

Name Of Approving Official

Approving Official has read and agreed to the C. College key policy & procedure

Signature of Approving Official \_\_\_\_\_ Date \_\_\_\_\_

- If the key(s) requested are for a temporary issuance, include an Expiration Date
- If the key(s) requested are to be held until Keyholder separates from the C. College or moves Departments leave the Expiration Date field blank and check the Until Separation box

If Key requested is a Master Key, Submaster Key or Gate Access Card, signature approval from Dean or Vice-President with authority over the designed space is mandatory (in addition to obtaining the approving official's signature). These keys are also subject to Facilities Management approval.

Name of Dean/Vice-President

Dean/Vice-President has read and agreed to the C. College key policy and procedure.

Signature of Dean/Vice-President \_\_\_\_\_ Date \_\_\_\_\_

<b>For Internal Facilities Management use only</b>	
Signature of Facilities Director _____	Date _____
Signature of Facilities Management AVP _____	Date _____

Approving Official has read and agreed to the Carthage College key policy & procedure