



Key Request Form Campus Services

Request Date: _____

Requestor Information

Name	Student/Employee ID#
Department	Position/Title
Mailing Address	Phone #

- Faculty
 Adjunct
 Staff
 Hourly
 Student
 Other (non-Snow)

Requested Keys

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Room#	Key#
<input type="checkbox"/> Washburn	<input type="checkbox"/> SVC	<input type="checkbox"/> Admin	<input type="checkbox"/> Other		
<input type="checkbox"/> Washburn	<input type="checkbox"/> SVC	<input type="checkbox"/> Admin	<input type="checkbox"/> Other		
<input type="checkbox"/> Washburn	<input type="checkbox"/> SVC	<input type="checkbox"/> Admin	<input type="checkbox"/> Other		
<input type="checkbox"/> Washburn	<input type="checkbox"/> SVC	<input type="checkbox"/> Admin	<input type="checkbox"/> Other		
<input type="checkbox"/> Washburn	<input type="checkbox"/> SVC	<input type="checkbox"/> Admin	<input type="checkbox"/> Other		
<input type="checkbox"/> Washburn	<input type="checkbox"/> SVC	<input type="checkbox"/> Admin	<input type="checkbox"/> Other		

Keys can be picked up at the Administration Front Office Room #121 Questions? Call ext. 2255

Required Signatures

X _____
 Department Head Signature (All Keys) Print Name

X _____
 President's Signature (Required for all Master Keys) Print Name

Key Agreement

I, the undersigned, acknowledge receipt of the keys designated above and **agree to return them to the Administration Front Office**. I also agree not to loan, transfer, give possession of, misuse, modify or alter the above keys. I further agree not to cause, allow or contribute to the making of unauthorized copies of the above keys. **(NOTICE: The unauthorized duplication of college keys and the use of keys for unauthorized access to college buildings is a misdemeanor and subject to criminal prosecution.)**

I understand and agree that violation of this agreement may render me responsible for the expenses for re-keying the affected areas. I also understand that I become financially responsible for re-keying of areas affected by lost keys. This is in accordance with Snow College Key Policy.

- Replacement of lost keys will be assessed at \$35 per inside door, \$60 per outside door, plus \$4 per key
- Replacement of card key or pass code for electronic locks will be \$12.50 per card/program change.

Signature: _____ Date: _____
(My signature acknowledges receipt of above listed keys and that I have read and understand the key agreement.)

Signature: _____ Date: _____
(Signature of Key Master acknowledging issuance of keys to above named person.)