

**Key Request Form**

**Email completed forms to:** [**williaja@etown.edu**](mailto:williaja@etown.edu)

Campus Security

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Keyholder Last Name:** | | **First Name:** | | |
| **Keyholder Dept:** | | **Title/Position:** | | |
| **EC ID#:** | **Faculty** | **Staff** | **Student** | **Other** |
| **Keyholder Phone #:** | | **Keyholder Email:** | | |

**ACCESS REQUESTED**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **BLDG NAME** | **Exterior Door**  **(Card Access)** | **Room#/Dept** | **PERMANENT** | **TEMPORARY** | **If Temp, ENTER Return Date** | ***Office Use Only-KEY ID #*** |
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**AUTHORIZATIONS**

**Department Chair or Supervising Administrator**

Authorizing signature signifies that the KEYHOLDER has been informed that key(s) are available from Campus Security 24 hours following the date of this request, and that if keys are not picked up within 15 days of this the request, the KEYHOLDER will be assessed a $15.00 re-inventory fee.

|  |  |  |  |
| --- | --- | --- | --- |
| **Authorizer Signature:** | | **Print Name:** | |
| **Authorizer Title:** | **Email/Phone:** | | **Today’s Date:** |

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**KEYHOLDER AGREEMENT**

**By my signature below, I agree to the following terms:**

* The key(s) described herein remain(s) the property of Elizabethtown College.
* Key(s) are entrusted to me for my exclusive use. I will not duplicate, loan, exchange or otherwise allow the use of said key(s) by any other person.
* I will report key loss, theft or destruction immediately to my department and Campus Security.
* If this key becomes lost, stolen or otherwise not available for return, I will pay the key replacement fee ($35.00/key).
* When I terminate employment or no longer need this key, or upon demand from Campus Security, I will return it promptly, IN PERSON, and ONLY to Campus Security.

***Keyholder Signature REQUIRED at time of key pickup.***

|  |  |
| --- | --- |
| Keyholder Signature: | Date: |

*If you have questions, please contact CAMPUS SECURITY, ext. 1264 or williaja@etown.edu*

*REV. 6/2017*