### University of Louisiana at Monroe

## Key Request Form

	New Request		Requesting Replacement Keys
Date:		Name:	
SSN#:		Department: Account #:	
Location:		Phone:	
	<u>Building</u>	<u>Room #</u>	<u>Key #</u>
Keys Requested			
To:			

My signature below certifies that I have read, fully understand, and agree to follow the university key policy. I certify that I have obtained approval by the department head as indicated by their signature below.

Employee Signature:		
Dept. Head Signature:		

Print Name

Sign Name

Submit the completed request form to the physical plant. Once the keys are completed the employee will be contacted at the phone number listed above to pick up their keys. Before the keys are given to the employee, the employee will sign below indicating that they have received their requested keys.

#### DO NOT COMPLETE THIS PORTION UNTIL KEYS ARE RECEIVED

I certify that I have received the keys that I requested above. I understand that I am personally responsible for these keys and agree to follow the university key policy. In the event these keys are lost I understand that I must immediately report this to the physical plant. Furthermore, I understand that I will be required to pay an appropriate fee for replacement keys, or if deemed necessary replacement locks & keys. I also understand that the keys must be turned in upon termination of my employment with the university. If the keys are not turned in I understand that the cost associated with replacement keys and locks will be deducted from my last paycheck.

Employee Signature: Date:
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# **Key Request Form Instructions**

- 1. Please check on top of the form if the request is a new request for keys or a request to replace lost or damaged keys.
- 2. Date Enter the date that the request is submitted to the physical plant
- 3. Name Print or Type the full name of the employee requesting keys
- 4. **SSN#** enter the social security number of the employee
- 5. Department enter the employee's department or division
- 6. Location Enter the building and room number of the employee's office
- 7. **Phone** enter a phone number where the employee can be reached
- 8. **Keys Requested To** enter the full building name, room number, and type of room for each key requested. If necessary you can attach additional paper for multiple keys. For the type section enter the type of the room, i.e. office, classroom, laboratory, lobby, main entrance, etc.
- 9. **Employee Signature** employee must sign to acknowledge their request and that they have read, fully understand, and agree to follow the university key policy.
- 10. **Department Head Signature** the department head must sign the key request form to indicate that this employee is approved to use the keys requested.

**NOTE:** Once all of these blocks have been completed please submit the request to the physical plant. Keep a copy of the request for your records. **Do not complete the bottom portion of the form until you receive your keys from the physical plant.** 

Upon receipt of the employee's keys from the physical plant the following steps should be completed:

- 1. Read and review the certification statement on the form.
- 2. **Signature** the certification must be signed before the employee takes possession of the keys.
- 3. **Date** the date the keys were received should be noted next to the employee's signature.

Any questions concerning the key request form should be directed to the physical plant, 342-5170.