OPERATIONS KEY REQUEST FORM

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<tr>
<th>Building</th>
<th>Room Number</th>
<th>Key Code (if known)</th>
<th>To be issued to:</th>
<th>Signature (upon receipt)</th>
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☐ New Employee  ☐ Office Relocation  ☐ Lock Change  ☐ Worn Key  ☐ Other, please explain:

Individual completing this request

Name: __________________________
Campus Ext: ____________________
Date: _________________________
Account to charge: ______________

Authorization Signatures

(Faculty)
Dean: __________________________

(Staff)
Supervisor: _____________________

- Please return all keys to Tami or Donna in the Lentz Hall mailroom, and be sure to include a name tag along with the key.
- Do not distribute to another employee.
- Carthage policy does not allow the distribution of facility keys to students, other than those provided via a residence option.
- Additional facility management approval may be required, depending on the key request.
- Typical key requests are completed within two business days. You will be contacted via email when your key is available for your use.

OFFICE USE:
Date received: ____________________ Date completed: ____________________ Keys returned: ____________________