



# Student Union Building Key & Card Swipe Access Request Form

Individuals requesting permission to check out building key(s) and/or obtain card swipe access to the Student Union must first read the Student Union Building Key & Card Swipe Access policy, receive supervisor's approval, and submit this request form to the Student Union Access Control Administrator.

**Requestor must complete this section**

|   |  |  |
|---|--|--|
| Name:                                   | Position/Title:                              | Department:                                |
| ID (800) Number:                        | Office/ Room Number:                         | Office Phone:                              |
| Cell Phone (if applicable):             | Campus Email Address:                        | Supervisor:                                |
| Requesting Key Box Access? (Yes or No): | Requesting Building Key Access? (Yes or No): | Requesting Card Swipe Access ?(Yes or No): |

- Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Building Key and/or Key Box Access Requested**

**For Office Use Only:**

| Office/Room #: | Quantity: | Key Box & Asset # | Key Hook # & N-Serial #: |
|----------------|-----------|-------------------|--------------------------|
|                |           |                   |                          |
|                |           |                   |                          |
|                |           |                   |                          |
|                |           |                   |                          |
|                |           |                   |                          |

**Card Swipe Access Requested**

- Areas: \_\_\_\_\_

Upon signing this document, I do certify that the above information is correct and that I have read and understand the Student Union Building Key & Card Swipe Access policy. I understand that by accepting these keys, I am accepting full financial responsibility for any cost that may be incurred due to the loss or theft of these keys. I understand that these keys are the property of the Student Union and, upon the end of my employment, all keys must be returned to the Student Union Access Control Administrator.

- Requestor's signature: \_\_\_\_\_ Key checkout date: \_\_\_\_\_
- Access Control Administrator approval signature: \_\_\_\_\_ Date: \_\_\_\_\_
- Access Control Administrator printed name: \_\_\_\_\_
- Key holder's signature: \_\_\_\_\_ Key return date: \_\_\_\_\_

A digital copy will be e-mailed to the Key Requestor.