

LEWIS UNIVERSITY KEY REQUEST FORM

Person requesting key(s): _____

Date: _____

Name: _____
Last Name
First
MI

Department	Building
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Key / Door number	Key / Door Number
Key / Door Number	Key /Door Number
Key / Door Number	Key / Door Number

All keys are the property of Lewis University and must be returned to the issuing Department Head upon termination of employment. The Department Head will notify Human Resources when all keys have been returned to Campus Security. I understand that I may be charged for costs associated with loss of keys, including lock changes and key replacements, in order to maintain the security of campus facilities.

 Signature of Requestor Date

In order to issue keys to employees, the following signatures must appear on this document:

 Department Head Date

 Dean (Not required for non-faculty requests) Date

 Vice President Date

 Director of Campus Security Date
