



**Whittier College
Campus Safety Department
Key Request Form**

**PLEASE PRINT IN BLACK INK
PLEASE CHECK TYPE OF REQUEST:**

REKEY NEW EMPLOYEE LOST KEY OTHER _____

DESCRIPTION:

DOOR CABINET DESK OTHER _____

BUILDING _____ **DEPARTMENT** _____

RESPONSIBLE PERSON _____ **(ONLY ONE NAME PER FORM)**

AUTHORIZATION: (ONE SIGNATURE ONLY)

VICE PRESIDENT'S SIGNATURE _____

ASSISNTANT TO THE DEAN OF FACULTY'S SIGNATURE _____

DEPARTMENT DIRECTOR'S SIGNATURE _____

KEY ID# _____	ROOM # _____	NUMBER OF KEYS _____
KEY ID# _____	ROOM# _____	NUMBER OF KEYS _____
KEY ID# _____	ROOM# _____	NUMBER OF KEYS _____
KEY ID# _____	ROOM# _____	NUMBER OF KEYS _____

CAMPUS SAFETY _____ **DATE** _____

NOTE: KEY REQUEST WILL NOT BE PROCESSED UNLESS COMPLETELY FILLED OUT AND REQUIRED SIGNITURES OBTAINED

IF THE LOSS OF A KEY OCCURS, WHETHER BY THEFT OR BEING MISPLACED. THE RESPONSIBLE PARTY SHALL NOTIFY THE CAMPUS SAFETY DEPARTMENT IMMEDIATELY. THE CAMPUS SAFETY DEPARTMENT WILL THEN TAKE APPROPRIATE REPORT.

ALL KEYS ARE TO BE RETURNED TO THE CAMPUS SAFETY DEPARTMENT UPON TERMINATION OF ANY EMPLOYEE. DEPARTMENT SECRETARIES ARE NOT TO GIVE KEYS TO REPLACEMENT EMPLOYEES. INDIVIDUAL DEPARTMENTS WILL BE CHARGED FOR ANY KEYS NOT RETURNED BY A TERMINATED EMPLOYEE.

DO NOT WRITE BELOW THIS LINE

NAME: _____	SIGNITURE _____
DATE RECEIVED: _____	BUILDING _____
DATE ISSUED: _____	ROOM # _____
NUMBER OF KEYS: _____	KEY CODE _____
DATE COMPLETE: _____	DATES CONTRACTED _____

