

## Key/Access Authorization Request Form

Please send all key/access request to

**Badgeaccess@unthsc.edu**



**Request type(please specify):**

Key ☐

Access ☐

Request date: \_\_\_\_\_

Employee ☐

Student ☐

Employee name: \_\_\_\_\_

Department: \_\_\_\_\_

Employee ID# \_\_\_\_\_ Email: \_\_\_\_\_ EXT. Number: \_\_\_\_\_

**Keys requested/access**

**After hours access (24/7 standard)**

1. Building: \_\_\_\_\_ Room(s) \_\_\_\_\_

2. Building: \_\_\_\_\_ Room(s) \_\_\_\_\_

3. Other additional location(s) \_\_\_\_\_

**Department master:**

YES ☐

NO ☐

Access card number: \_\_\_\_\_

**Special keys\* (Keys off Master System)**

Location: \_\_\_\_\_

Other/additional location(s) \_\_\_\_\_

\_\_\_\_\_  
**Employee signature**

\_\_\_\_\_  
**Department head signature**

\_\_\_\_\_  
**Printed name**

\_\_\_\_\_  
**Printed name**

Phone Ext: \_\_\_\_\_

\*Keys/Cards of the Master System may not be issued to a person other than one employed by the controlling department except as provided by the current written controlled access policy.

**Controlling department** (please obtain signature before submitting)

(If different than requesting department):

\_\_\_\_\_  
**Printed name**

\_\_\_\_\_  
**Signature**

Phone Ext: \_\_\_\_\_

**Request requiring vice president approval** (please obtain signature before submitting)

Grand Master keys, Building Master keys require approval of the vice president

\_\_\_\_\_  
**Printed name**

\_\_\_\_\_  
**Signature**

Phone Ext: \_\_\_\_\_

**LOCKSMITH USE ONLY**

**Keys numbers:**

Date completed: \_\_\_\_\_

Locksmith: \_\_\_\_\_

**POLICE DEPARTMENT USE ONLY**

Date activated: \_\_\_\_\_ Activated by: \_\_\_\_\_

Keys picked up: \_\_\_\_\_

**\*\*\*ALL KEYS ARE THE PROPERTY OF UNTHSC AND MUST BE RETURNED TO THE POLICE DEPARTMENT WHEN NO LONGER NEEDED\*\*\***