



# Key / Cardkey Authorization Request Form (Please Print)



REQUEST TYPE (Please Specify): KEY  CARDKEY

REQUEST DATE: \_\_\_\_\_ EMPLOYEE  STUDENT   
 EMPLOYEE NAME: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_  
 EMPLOYEE ID# \_\_\_\_\_ EMAIL: \_\_\_\_\_ EXT. NUMBER: \_\_\_\_\_

KEYS REQUESTED / CARD KEY ACCESS AFTER HOURS CARDKEY ACCESS

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 off 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

Key Numbers: \_\_\_\_\_

DATE COMPLETED: \_\_\_\_\_  
 LOCKSMITH: \_\_\_\_\_

**POLICE DEPARTMENT USE ONLY** Date Activated: \_\_\_\_\_ Activated By: \_\_\_\_\_

KEYS VERIFIED RECIPIENT NOTIFIED KEYS PICKED UP ENTERED

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