



DILLARD
UNIVERSITY

Dillard University Facilities Management Key Request Form

Date: _____

Requester: _____ Dept.: _____ Status: _____
(Please print) *(Faculty/Staff/PTI/Student)*

Deliver To: _____ Bldg.: _____ Phone #: _____
(Please print)

Please Check: New/Worn Key _____ New/Worn Card _____ ****Lost/Stolen Key/Card** _____

Reassign Temporary Card/Key _____ & _____
(Print card/key # here)

*Authorized By: _____ Phone #: _____
(Please print - sign below) *(For authorization verification)*

1. * All Key Request forms must be signed by an authorized member of your department to be valid. Invalid forms will be returned to the originating department.
2. **** Requests for lost or stolen keys/cards must be accompanied by a LOST/STOLEN KEY REPORT. A charge for each item will be assessed. If the lost or stolen key was a master, please contact the help desk (816-4131) immediately. Your department may be responsible for funding the re-key of the affected area or facility.**
3. Indicate the status of the individual receiving the key or card.
4. A reasonable effort will be made to deliver keys/cards per your instructions above. However, if the individual is not available at that time, keys will be delivered to the requester or a department staff member. **The recipient's signature is required.**
5. Keys may **NOT** be transferred within the requesting department. Once signed for, the requestor and your department are responsible for that key. It is recommended that your department maintain an internal key assignment list as a means of tracking keys. **Facilities Management cannot track keys beyond the person who requested them.**
6. Unwanted or obsolete keys, or keys from transferring or terminating employees, **MUST** be returned to the help desk which will end your department's responsibility for them.
7. Duplicating or replacing keys through an outside agency, company, or private business other than the University is **prohibited**. **The duplication or possession of any unauthorized university key is considered a violation and will be reported to the appropriate authorities.**

REQUESTER'S SIGNATURE

AUTHORIZATION SIGNATURE

KEY NUMBERS(S)	BUILDING	ROOM #/DESCRIPTION
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

RECEIVED BY

DATE