

UNIVERSITY OF NEW HAVEN

KEY REQUEST FORM

DIRECTIONS:

1. Person responsible for, and using keys should complete this form and submit it to the Dean, Director or Department Chairperson.
2. If request is approved, the Dean, Director or Department Chairperson should sign the request and submit it to the University Police Department for processing.
3. The person signing for the key(s) will be notified when ready and will be asked to sign when issued at the University Police Department.

NOTE:

1. Keys will only be issued when there is a demonstrated need.
2. Building masters and above will require approval by the appropriate Vice President.
3. Lost or stolen keys are to be **IMMEDIATELY** reported to the University Police Department.
4. All issued keys are the responsibility of the employee signing below and will be turned in to the University Police Department upon termination of employment.
5. **Keys will only be released to the person named below with proof of ID upon receipt.**
6. **DO NOT SWAP KEYS!!!**

KEY REQUEST:

Name: _____ Date: _____

Department: _____ Phone #: _____

Email: _____

Key(s) Requested: Building: _____ Rm: _____, Building: _____ Rm: _____

Building: _____ Rm: _____, Building: _____ Rm: _____

Reason for Request: _____

Signature: _____

Signature of Dean, Director of Department, or Chairperson: _____

Signature of Vice President (if required): _____

KEY PICK-UP:

Date Completed: _____ Completed by: _____

By signing this I am verifying that I have received the keys listed above, and that upon termination from the University I will turn in the keys to the University Police Department.

Signature _____ Date: _____