# **Keene State College Key Request**

Key(s) requested for: (print): Click here to enter text.

Division: Click here to enter text. Position: Click here to enter text. Phone ext: Click here to enter text.

Building: Click here to enter text. Door # (room): Click here to enter text.

Initial request  Replacement  If replacement, give reason: Click here to enter text.

Name of person filing this request: Click here to enter text. Phone ext:Click here to enter text.

Dean/Director/PA approval: (signature) Date

**I accept the keys listed below with the following understandings:**

* **Keys issued to me are the property of Keene State College, and are on loan to me.**
* **Keys are intended solely for my personal use and must not be loaned to others or duplicated.**
* **I understand that I must return the keys I have been issued to the KSC Maintenance Office when I end my employment at Keene State College, or when I move to a different area of the campus and no longer need the keys.**
* **In the event a key is lost or stolen, I will notify the KSC Lockshop (x 2211) immediately.**
* **I understand that should a key issued to me be lost, I must pay for replacing the key, ($5.00).**
* **I understand that the fees for key replacement will increase with subsequent losses.**
* **I understand that the department for which I work will pay the cost of any re-keying deemed necessary by the Director of Physical Plant.**

USNH ID: Click here to enter text. Signature

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(for office use)

Phys. Plant Director: Approved  Denied  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for denial/comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List key(s) issued:

Key(s) issued by: Date

Key(s) received by: Date