

**BRANDEIS UNIVERSITY OFFICE OF FACILITIES SERVICES
KEY REQUEST FORM**

Please note:

Every key issued must have a person/user assigned to it. Use a separate form for each person.

** Unless you are a designated Super User or need multiple keys of the same key (use Parts IV & V instead of Part I)

Lost or stolen keys must be reported immediately to Public Safety (781-736-5000) in addition to filling out the Lost Key Form.

Use Return Key Form when returning keys.

Anyone having 2 or more keys will be required to have a key ring. (You will be asked to bring all keys in to put on a ring)

PART I KEY REQUEST - complete for all key requests (i.e., office/room key, storage room keys, etc.)

Name (Who will have key) Job Title

Email: Extension

1.

Building #	Door #	Key #

3.

Building #	Door #	Key #

2.

Building #	Door #	Key #

4.

Building #	Door #	Key #

Is this for a new Employee (Yes or No) If Yes, who did they replace

Is this key to replace a broken key (Yes or No) *If Yes; broken key must be returned when the new key is picked up.

Reason keys are being requested if not identified above: _____

Not including this request, how many keys do you have assigned to you?

PART II - APPROVAL – Keys must be approved by my DEPARTMENT DEAN, VP, or DIRECTOR

Approved by: _____
Print Name Extension

Approved by: _____
Signature Date

Position: _____
Job Title Department

Billing Information:

Account	Fund	Cost Center	Program	Project / Grant

Charge line - Fee's may vary; see key policy for cost. (ie. Most keys charges will be \$50 per key copy)

PART III KEY RELEASE - Signed at time of pickup in Office of Facilities Services (Brandeis ID required)

I accept receipt of the keys listed on this form. (Please note: keys will not be released to student employees.)

Print Name Title

Signature Date

Keys Provided by: _____
Print Name of Facilities Services Member Receiving Key Date

PART IV MULTIPLE KEYS OF SAME KEY (Fill this part out instead of Part I)

All names must be listed that will receive a key. The number of names should match the number of keys. (no duplicate users).
 A new form is needed for each key or for more than 10 copies/request.
 Part II still needs to be filled out

1.			
Building #	Door #	Key #	How many keys needed/requested

Reason keys are being requested (ie. additional employees, new doors/cores, broken key) _____

	<u>Name (Print)</u>	<u>Job Title</u>	<u>New Employee (Y/N)</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

PART V SUPER USER ONLY (Fill this part out instead of Part I)

Only approved Super Users are allowed to use this section.
 All keys will fall under the responsibility of one dedicated "owner".
 Part II still needs to be filled out

1.								
	Building #	Door #	Key #	Quantity	Building #	Door #	Key #	quantity
2.								
	Building #	Door #	Key #	Quantity	Building #	Door #	Key #	quantity
3.								
	Building #	Door #	Key #	Quantity	Building #	Door #	Key #	quantity

Reason keys are being requested (ie. additional employees, new doors/cores, broken key) _____

Designated "Owner"

Print Name	Extension
Signature	Date
Job Title	Department

All keys remain the property of Brandeis University and MAY NOT BE COPIED OR TRANSFERRED to any other employee.
AFTER OBTAINING NECESSARY SIGNATURES ON FORM, PLEASE ATTACHED TO WORK REQUEST.
KEYS NOT PICKED UP WITHIN 30 DAYS OF COMPLETION WILL BE DESTROYED AND CHARGED