

PLEASE PRINT CLEARLY – OR USE FILLABLE FIELDS

Work Order #

ID #

Lock / Key Request Form

This form requires original signatures and therefore must be printed out and mailed to:

Key Request

Service Building

(all information is required)

Date:

Key Holder (Name, Title):

Key Holder’s Address (Building, Room):

Phone:

Department:

Address of Requested Key (Building, ALL Rooms – please be Very Specific):

Single Room

Other Doors – Please Specify

Reason for Request

Acceptance of keys covered by this request is with the understanding that issuance and use will be in accordance with the campus Key Policy at <http://www.oneonta.edu/admin/police/pages/keypolicy.asp>

Signatures (original only):

(Print Name)

APPROVED BY (Department Chair or Director Signature):

(Print Name)

***** FOR OFFICIAL USE ONLY *****

MOC Approval: