

TENNESSEE TECHNOLOGICAL UNIVERSITY

NEW KEY REQUEST FORM

New key(s) _____ or Replace lost or stolen key(s) _____ (attach copy of UPD Report)

NAME: _____ T# : _____ DATE: _____
Last First MI

DEPT: _____ EXT #: _____ INDEX#: _____

EMAIL: _____ STATUS: FACULTY _____ or STAFF _____ FULL-TIME: YES _____ or NO _____
 NEW HIRE: YES _____ or NO _____ If Yes, start date: _____

<u>QUANTITY</u>	<u>BUILDING / ROOM # / DOOR</u>	<u>KEY #</u>	<u>SEQUENCE #</u>

Authorization for Key(s) Request :

Department Chairperson Printed Name	Date	Dean or Administrative Officer Printed Name	Date
Department Chairperson Signature	Date	Dean or Administrative Officer Signature	Date
***Signature of Applicant Indicating Receipt of Keys	Date	AVP of Facilities and Business Services Approval	Date

***Signature verifies keys have been received and keyholder is familiar with TTU Key Policy #561

RETURNED COMPLETED FORM TO FACILITIES AND BUSINESS SERVICES: 220 W 10th Street - Campus Box 5041
 New key(s) will be held for 30 days from notice to pick up before they are destroyed at the departments expense.
 Eagle Card required as ID for pick up - only keyholder may pick up key(s).

NOTE: Any lost or stolen key(s) must be reported to University Police. Responsibility falls to the key holder's department and the department will be held subject to cost of recoring and replacing key(s).