Reset Form

# TENNESSEE TECHNOLOGICAL UNIVERSITY
# NEW KEY REQUEST - RESIDENTIAL LIFE BUILDINGS

Please print or type. You may fill in form on screen and print to obtain signatures **DATE:** _____

Name: _____ _____ _____ T#: _____
(Last) (First) (MI)

Department: _____ Box #: _____ Ph #: _____

| Account Information: | Status Information: | Action Information: |
|---|---|---|
| Index _____ | Faculty ☐ | New Key ☐ |
| Fund _____ | Staff ☐ | Key Returned ☐ |
| Org _____ | Student ☐ | Key lost/stolen ☐ |
| Program _____ | Other _____ | (Documentation attached) |

| Building | Room(s)/Door/Area | No. on Key | For Office Use Only |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

**Authorization for Key Request: By signing I certify that the person receiving key(s) has passed a background check and has been fingerprinted. (Signatory authority cannot be delegated.)**

_____ _____
Director of Residential Life Date

_____ _____ _____ _____
Signature of Applicant indicating Receipt of Key(s) Date Assoc.VP, Facilities & Business Services Date

**Signature for Key Return to Facilities & Business Services:**

_____ _____ _____ _____
Signature of Applicant indicating Return of keys listed above Date Assoc. VP, Facilities & Business Services Date

**Upon completion of this form, send to Facilities, Box 5041. Lost or stolen keys must be immediately reported to University Police.**