

TENNESSEE TECHNOLOGICAL UNIVERSITY
NEW KEY REQUEST

Any keys issued to key holder must be returned to Facilities once no longer needed.

Date: _____

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

Department: _____ Account No: _____ Box#: _____ Ph #: _____

Status: Faculty _____ Staff _____ Action: New Key _____ Key(s) Lost or Stolen _____

Other _____

<u>Building</u>	<u>Room(s)/Door(s)</u>	<u>No on Key</u>	<u>For Office Use Only</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Authorization for Key Request:

 Departmental Chairperson Date

 Dean or Administrative Officer Date

 Printed Name of Chairperson

 Printed Name of Dean or Administrative Officer

 Signature of Applicant indicating Date
 receipt of key(s)

Upon completion of this form, send to Facilities, Box 5041. Report lost or stolen keys to University Police. Keys will be held for 30 days, if not picked up within 30 days the department will be charged and the key will be destroyed.