

KEYS NOT RETURNED Key & Building Card Access Request Form

Supervisor's Initials Revision: Jan. 2014

Section 1: Identification – Enter information of the Key Holder requesting key(s) / card access credential(s)

Instructions: SJSU Personnel must take responsibility for keys issued to non-SJSU personnel (ie Volunteers). In such cases provide the information of the SJSU employee taking responsibility for the keys. Check "Other," and in the field to the right of that box provide the name of the volunteer/contractor who will receive the key(s) or building card.

Tower Card No. Department & Division/College & Phone No. Phone (Key Holder) Email (Key Holder) – Required* Check One: Staff Faculty Student Other-Specify: (Volunteer/Contractor) Section 2: Request Type – Enter the type of request Check all that apply: Section 3: Building Access – List Buildings and Rooms Requiring Access Instructions: Provide Building and Room Number requiring access. For card Access complete recessary Field below and provide any additional information in the appropriate Field Track of Line (Building & Room No. Only FOR FIRE OUTS FIEld (Building	Last Name					First Name					Date	
Tower Card No. Department & Division/College & Phone No. Phone (Key Holder) Check One: Staff Faculty Student Other - Specify: (Volunteer/Contractor) Section 2: Request Type – Enter the type of request Check all that apply: Lost Key Card Section 3: Building Access – List Buildings and Rooms Requiring Access Instructions: Provide Building and Room Number requiring access. For Card Access complete necessary Field below and provide any additional information in the appropriate field. Provide Building & Room No. Only FOR FD& USE ONLY Building Room No. Key/Card No. Serial No. Initials Room No. Key/Card No. Serial No. Initials Building Room No. No. Key/Card No. Serial No. Initials Room No. Key/Card No. Serial No. Initials												
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Check all that apply: Section 3: Building Access - List Buildings and Rooms Requiring Access	Check One:	Staff	Faculty	Student			or)					
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Additional Information: INCLUDE BUILDING CARD ACCESS DEACTIVATION DATE/ADDITIONAL INFORMATION AS REQUIRED						_						
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Print Name of Supervising MPP – Provide Tower Card No. Signature of Supervising MPP (required) Date	Print Name of Supervising MDD - Provide Tower Card No. Signature of Supervising MDD (required)										Date	