Lewis University Police Department Key/Access Card Request/Agreement

Please Type or Print Legibly

| Α. | PERSON INFORMATION: | Faculty: | S aff: | Student: | Other: |
|----|---------------------|----------|---------------|----------|--------|

1. Keyholder Name - Pens

Key/Access Card Form Instructions

Please Type or Print All Fields Legibly

SECTION A - PERSON INFORMATION

Select the appropriate checkbox identifying whether the keyholder is a Faculty Member, Staff, Student or Other.

- 1. Keyholder Nane This is the name of the personble issued the key and/or accessard.
- 2. Keyholder University ID Number This is the person's University ID Numbused to submit electronic work requests for the creation of the key and/or access card.). Vendors should use their company be rum
- 3. Date Enter the date you are making the request.
- 4. Phone Number Enter the phone number of the keyholder Box 1 who is to receive the key/access card.
- 5. E-Mail Address Enter the e-mail address of the keyholde Bionx 1 who is to receive the key/access card.
- 6. Job Title-Enter the job title/position of the keyholdern Box 1 who is to receive the key/access card
- 7. Department Enter the Department name of the personBox 1 who is to receive the key/access card

SECTION B - ACCESS TYPE NEEDED

Select the appropriate checkbox to indicate whether a key and/or an access card are being requested.

- 8. AccessRequested To- Enter the Building Name(s), Room Number(s) for Whichaccess is needed. e.g., Science/ AS-106-L, Student Union / SU-010-B, etc... Enter the key number needed if known.
- 9. ListyreeaTwm4bl2 0 .02 58.5