



HOWARD COLLEGE/SWCID

ACCESS REQUEST

Please print

DATE:	
EMPLOYEE:	
TITLE/DEPARTMENT:	
SITE:	COLLEGE PHONE #

KEY CODE: BUILDING NAME & ROOM # QTY: E=Exterior
 (interior only) (Room # for Interior Access) I=Interior

Request approved by supervisor: _____ **Date:** _____

Request approved by Director of HR: _____ **Date:** _____

Keys received by Employee: _____ **Date:** _____

I acknowledge receipt of the keys designated above. I also agree not to loan, transfer, give possession of, misuse, modify or alter the above keys. I further agree not to cause, allow or contribute to the making of any unauthorized copies of the above keys. I understand and agree that violation of this agreement may tender me responsible for the expense of a relock for the affected areas. Lost or missing keys will be replaced and charged to the individual at a cost of \$40.00 per key. I understand that loaning keys to a non-college employee under any circumstances may result in termination of employment.

<u>HR OFFICE USE ONLY:</u>		
REQUEST SENT TO FACILITIES:	REC'D KEYS IN HR:	NOTIFIED EMP:
_____	_____	_____
KEYS RETURNED :	HR REP:	
_____	_____	