

Barstow Community College Key Request

Fill in the requested information, print and obtain authorized approving official's signature. Bring the signed form and your photo ID to Maintenance and Operations.

Requestor Status

Contractor

Faculty

Staff

Requestor Name _____

Department _____

Key(s) Requested Below

Unauthorized use, or duplication, of District keys may be grounds for discipline and/or termination. Keys shall not be loaned to students or other unauthorized persons.

Lost keys must be reported immediately to the M&O director. A charge will be made for the actual cost of replacement of lost keys.

Serial Number (M&O to complete)	Room #	Date Issued	Expiration Date for Students, Adjunct Faculty, and Contractors	Signature after key is received	Date Returned	INT

Email of Approving Official _____

Name of Approving Official _____

Signature of Approving Official _____ Date _____

If key requested is a Master Key, Sub master Key or Gate Access Card, signature approval from Dean or Vice-President with authority over the designated space is mandatory (in addition to obtaining the approving official's signature). These keys are also subject to Maintenance & Operations approval. All Grand Master, Performing Arts Center Master and Wellness Center Master Key requests require the President's approval.

Director of Maintenance & Operations _____ Date _____

Dean/Vice-President _____ Date _____

President (if required) _____ Date _____