



LAMAR UNIVERSITY KEY/ELECTRONIC ACCESS REQUEST AGREEMENT

dept\_facilities@lamar.edu 409-880-8470

DATE \_\_\_\_\_

BANNER DEPT. INDEX NO. \_\_\_\_\_

ISSUED TO \_\_\_\_\_

L# \_\_\_\_\_

FOR BUILDING \_\_\_\_\_

Room # \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

REQUESTOR \_\_\_\_\_

AVP FACILITIES MANAGEMENT COORDINATION/APPROVAL

KEYS MUST BE APPROVED BY THE PROPER AUTHORITY

TYPE	QUANTITY	APPROVAL LEVEL	PRINTED NAME	SIGNATURE
INDIVIDUAL INTERIOR DOOR		CHAIR/DIRECTOR		
BUILDING ENTRY KEY		CHAIR/DIRECTOR		
INTERIOR SUB-MASTER		VICE PRES/DEAN		
BUILDING MASTER		VICE PRES/DEAN		
GRAND MASTER		PRESIDENT		

BY SIGNING THIS AGREEMENT, I ACKNOWLEDGE THAT I HAVE REVIEWED AND UNDERSTAND THE LAMAR UNIVERSITY KEY AND ELECTRONIC ACCESS CONTROL POLICY, MAPP: 06.02.01, AND ACCEPT THE RESPONSIBILITY OF SECURING ALL KEYS WITHIN MY POSSESSION AND RETURNING ANY KEYS THAT ARE NO LONGER NEEDED, OR WHEN I TERMINATE MY EMPLOYMENT WITH LAMAR UNIVERSITY. I ALSO UNDERSTAND THAT FAILURE TO MEET THESE RESPONSIBILITIES, COULD RESULT IN FINANCIAL LIABILITY FOR ME OR MY DEPARTMENT. I FURTHER UNDERSTAND THAT LAMAR-ISSUED KEY(S) ARE NOT TRANSFERABLE TO ANY OTHER PERSON AND LOSS OF KEY(S) MUST BE REPORTED TO MY DEPARTMENT HEAD AND FACILITIES MAINTENANCE AS SOON AS POSSIBLE.

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SIGNATURE