SOUTHERN ILLINOIS UNIVERSITY
EDWARDSVILLE

Key Request Form

Key Control Use Only

Last Name:

First Name:

SIUE ID No:

Personnel Class:

Department Name:

Charge to BP Acct. #:

○ Issue New Key

Bldg:_____

Key Code:_____ Room#:_____

○ Transfer Key From:

Name: _____

Key Code:_____ SN:_____

VCA Approval (Bldg. & Campus Masters) Date

Fiscal Officer Signature Date

Signature of Person Receiving Key Date

My signature verifies that I have read and understand the rights and responsibilities of key usage as stated in the SIUE Key and Lock Policy located at siue.edu/policies/6f2.

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CLEAR FORM

CLEAR KEY INFO

ONLY KEEP DEPT

SAVE FORM

EMAIL FOR SIGNATURE

SEND TO KEY CONTROL

1. Complete required fields base on transaction type of Issue New or Transfer From.
   -Enter all 9 digits of SIUE ID number.
2. Requires Fiscal Officer signature before sending.
3. For transfers, have person receiving key digitally sign before sending form.
4. Click Submit by Email button. No need to print form.
5. If "SEND TO KEY CONTROL" OR "EMAIL FOR SIGNATURE" buttons don't work, use "SAVE FORM" button and manually attach to your own email to FMKEYCONTROL@SIUE.EDU