



**Key & Card Access Application**

(Please fill out the information below for who will be receiving access, and please PRINT CLEARLY.)

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

ID# \_\_\_\_\_

Office \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Group/Dept. \_\_\_\_\_

Please select one of the following:

Faculty                       Staff                       Student

Other \_\_\_\_\_

Requesting **key(s)** to (building/rooms): \_\_\_\_\_

Requesting **card access** to (building/rooms): \_\_\_\_\_

Requesting to be added to **mailing lists** for (building/rooms): \_\_\_\_\_

- *I acknowledge that I have received as a loan the following keys & or Card Access, administered by the Harvard John A. Paulson School of Engineering and Applied Sciences.*
- *I accept the responsibility of this loan. I agree to report the loss of any such key/ID; to return the keys at any time at the request of the School; and to return them in any case before leaving the University for a period of three weeks or more.*
- *I agree to use these keys/Card Accesses for legitimate purposes only. I agree not to use them to admit anyone to any room or building of the University who at the time is not entitled to such admission.*
- *I agree not to cause any duplicate or copy to be made of any of these keys. I agree not to mutilate or change these keys.*

For Office Use Only	
Issue Date:	_____
Keys:	_____
	_____
	_____
Keys Issued (initial):	_____
Card Access Granted (initial):	_____
Added to E-mail Lists (initial):	_____
Entered in Key Organizer (initial):	_____

The person being issued keys/access:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

The issuing of keys is approved by:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Title/Office: \_\_\_\_\_

Date: \_\_\_\_\_