

BALD EAGLE AREA SCHOOL DISTRICT

KEY/KEY FOB REQUEST FORM

Date: _____

Name of person whom key/key fob is issued: _____

Key/key fob recipient's department/job title: _____

Key/key fob issued for: Building: _____

Room: _____

Justification for issuance of key/key fob: _____

This requisition is being filed to obtain:

_____ New key/key fob

_____ Replacement for one of the following:

_____ *Lost key/key fob _____ Broken key/key fob (must be attached)

Date key/key fob returned: _____ Accepted by: _____

Approval by Principal: _____

Approval by Facilities Manager: _____

Approval by Safety & Security Coordinator: _____

*****TO BE COMPLETED WHEN KEY/KEY FOB IS ISSUED*****

Issued key/key fob identification number: _____

_____ Master Key _____ Sub Master Key _____ Other _____ Replacement Fee _____ Amount Paid

***Lost or Non-Returned keys/key fobs are subject to a charge for replacement.**

Master Keys & Classroom Sub Masters - \$500.00

Sub Master Keys - \$250.00

All Other Keys - \$50.00

Key fob - \$10.00

With my signature, I accept the above described key. I have read and understood the Bald Eagle Area Policy 709-Building Security Policy and I understand this key/key fob is the property of the Bald Eagle Area School District. If this key/key fob is lost or misplaced I will report this occurrence immediately to the Facilities Manager and/or Safety & Security Coordinator. Keys/key fobs are not to be transferred from one person to another. All key/ key fob transfers require that the key/key fob be returned to the Facilities Manager, his/her designee or Safety & Security Coordinator. Keys/key fobs will then be re-issued to the new carrier upon proper authorization. The loaning of keys/key fobs to others is strictly forbidden.

Recipient's Signature: _____ Date: _____