



Key Request Form

Requestor Information

Contact Person _____ Ext _____ Date _____
 Department _____ Organization Number _____

Key Information

Type of key needed

- Individual Room** Required Approval = Department Chair or Department Head
- Department Entrance** Required Approval = Dean or Senior Director
- Department Submaster** Required Approval = Dean or Senior Director
- Building Entrance** Required Approval = Dean or Senior Director and Division Vice President and Chief of Campus Safety
- Building Master** Required Approval = Dean or Senior Director and Division Vice President and Chief of Campus Safety

Key Holder (Must be an 01 or 02 Employee)

Print Name of Key Holder	Biola ID	Please List Each Door	Office Use Only

Approval Information (Required Prior To Submitting Request)

Department Chair or Department Head

_____ Signature _____ Date _____
Print or Type Name

Dean or Senior Director

_____ Signature _____ Date _____
Print or Type Name

If you are requesting a Building Master or a Building Entrance key the following additional signatures are needed:

Division Vice President _____ Date _____
Signature

Chief of Campus Safety _____ Date _____
Signature

Office Use Only

Work Order Order Date Date Completed Amount Billed