

EMU Key Request Form - Assigned Key Holder

Fax: 734-487-8680
Phone: 734-487-3380

Fund # _____ Org # _____ Prog # _____

Key Holder Name _____
Last First

EMU ID # E _____ Email Address _____ @emich.edu

____ Faculty/Staff ____ Student Phone # _____

Department _____ Position Title _____

Key(s) Requested:

Key Type	Rm #	Building/Area Description	Qty	Phys Plant Use	
				Prefix	Serial #

Key Types:

GM=Grand Master - Operates all locks in a division, college or large building. Authorized by VP or AVP of Dept.
MK=Master Key - Operates all locks within a particular building. Authorized by Dean, VP or AVP of Dept.
SMK=Sub-Master Key - Operates all locks within a particular area, suite, or dept. Authorized by Dept Head/Director
OK=Operating Key - Operates a specific door or storage room lock. Authorized by Dept Head/Director
FL=File Cabinet Key (Please indicate the number on the lock) Authorized by Dept Head/Director

Authorizing Authority Name:(Print) _____ Title _____

Authorizing Authority Signature: _____

____ Keys will be picked up by Key Coordinator, send pick-up notice to _____ @emich.edu

____ Keys will be picked up by Key Holder. Pick-up notice will be sent to Key Holder's email address.

*****Sign below on day of pick-up*****

Key Coordinator:(Print) _____ EMU ID # E _____

Key Coordinator Signature _____ Date _____

Key Holder Signature _____ Date _____

By signing this form you are agreeing to the responsibilities associated with possession of a key and to comply with the Eastern Michigan University key policy and procedures. This includes reimbursing the University \$25.00 per assigned key for keys lost or not returned upon the termination of University employment or class attendance.

Physical Plant Use Only: Date received ____/____/____ Work Order # _____
Sent email for key pick-up on ____/____/____ Entered into TMA Key Log