

The Harker School

Key Request Form

Minimum of 5 business Days Required for Processing After Completed Form is Received

Note: Approvals from <u>direct supervisor and division head</u> of campus to be accessed are required.

 Complete Request Fields Print Document or Save as New Doc. 			Sign Employee Agreement Obtain Supervisor's Signature				5) Obtain Division Head's Signature 6) Email to KeyRequest@harker.org				
equestor Information:											
Employee Name:						Today's Date					
Home Department:						Office/Classroom #:					
Home Campus:	STG	UNN	BKN	BYN	WIN	Phone #:					
Keys:											
Site:	STG	UNN	BKN	BYN	WIN	Site	STG	UNN	BKN	BYN	WIN
Building Name:						Building Name					
Room #/Description:						Room #/Description					
Reason:						Reason					
Site:	STG	UNN	BKN	BYN	WIN	Site	STG	UNN	BKN	BYN	WIN
Building Name:						Building Name					
Room #/Description:						Room #/Description					
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Reason: ign: Employee Agreement: I acknow	wledge m	ny responsil	bility for t	he safe-ke	eeping of k	Reason		ol. I will no	t attach th	em to my	ID
sign:	_		nese keys.	I will retu terminatio	urn any ke on of empl	eys received from The Ho ys requested by Harker A oyment.	rker Scho			-	
Sign: Employee Agreement: I acknow Ianyard, copy, lend or neglect th	_		nese keys.	I will retu terminatio	urn any ke on of empl	eys received from The Ho	rker Scho			-	
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Employee Agreement: I acknow lanyard, copy, lend or neglect the approvals: Supervisor's Name: Division Head's Name: *Approved Administrators: K. Allen, P	(Ple (Ple Barsky, E	ease Print) ease Print) E. Barth, M. E	nese keys.	I will retutermination E Sup Division	orn any ke on of empl Employee Dervisor's On Head'	reys received from The Ho ys requested by Harker A oyment. e Signature: s Signature: ("Must be o, K. Giammona, S. Hale, S. Le	rker Schodministro	tion at any	time and d	all keys up	oon