**PURPOSE:**

This form is used by the Access Coordinator to record the issuance of keys and/or clearances, and grants the said individual access to specific buildings, rooms and/or areas, or combinations thereof. Such authorization acknowledges that the individual to whom such access is assigned has the authority and the functional responsibility to enter the respective areas.

**REstrictions:**

* Access is limited to the areas designated in this agreement.
* Access is restricted to the specified and approved days and times.
* Access to the facility will be for the agreed purpose only.
* No other individual may enter the approved facility using the access privileges granted.

**Lost or Stolen Access Card:**

* The loss of a key/access card must be reported immediately to the Access Coordinator by the individual to whom the key/access card has been issued.
* A lost or stolen key/access card will result in the immediate termination of access privileges, and will be reinstated only after resubmission of another Key/Clearance Issuance Form.

**Access Changes:**

* If access needs to be changed from those which have been granted herein, the said individual will notify the Access Coordinator for completion of a new Key/Clearance Issuance Form.

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**Building or Facility Being Accessed**

<table>
<thead>
<tr>
<th>Building or Facility Being Accessed</th>
<th>Room No.</th>
<th>Key Code</th>
<th>Serial No.</th>
<th>Clearance Code</th>
<th>Issue Date</th>
<th>Initials</th>
<th>Date Returned</th>
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</table>

**Employee Compliance Acknowledgement:**

I have read the above. In accepting keys and/or clearances from the Access Coordinator, I agree to comply with the terms specified above and all related University policies.

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Form GF8-18ESM

(06-05-07)