

**UW Bothell / Cascadia CC - KEY REQUEST/Temporary Access Card FORM**

Facility Services Key Control Department - (425) 352-5466

**Requester Information**     Faculty     Staff     Student \*Student's supervising faculty/staff are responsible for collecting & returning keys to Physical Plant at end of assignment

Period of Assignment (Please specify **both** beginning & end date) \_\_\_\_\_

Name : (Print) \_\_\_\_\_ Date Requested: \_\_\_\_\_

Department / Program / Office: \_\_\_\_\_

Phone#: \_\_\_\_\_

**Key Information** (Shaded areas for Plant use only)

Building(s):	UW1	UW2	DISC	HH	HV	UWBB	Truly	Prox
(check)	CCC	LB1	LB2	LBA	FS	S. GARAGE	SPECIAL	

Room#	Key#	Sec. Lvl.	Issue Dt.	Init.	Ret. Dt.	Init.	Room#	Key#	Sec. Lvl.	Issue Dt.	Init.	Ret. Dt.	Init.

**I have read and fully understand all applicable UWB / CCC key policies and procedures, and agree to use the keys that are issued to me by Physical Plant in an authorized manner only and in compliance with the policies.**

Requester' Name	Access Controller's Name	Issuer's Name
_____	_____	_____
Print	Print	Print
_____	_____	_____
Signature & Date	Signature & Date	Signature

\* White - UWB Requests    \* Purple - LIBRARY Requests    \* Blue - CCC Requests    Public Safety, Box 358570

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