

KEY CARD REQUEST FORM

Mail To: keycards.central@seattlecolleges.edu

Requests must be made by Division/Department Head or official key-card delegate

Card User Name:

This card is a (select one):

New Card Modification Replacement *reason*

Employee Info:

EMPL ID: (If EMPL ID is not available, please submit the request and provide it later)

Employee Type: Personal Office Number

Permanent

Temporary (If temporary, please choose end date)

Key Card Info:

Access Levels (select all that apply)

Add Delete Add Delete Add Delete Add Delete Add Delete Add Delete

Notes:

(Precision access here)

Request Made By:

Dept/Div:

Div/Dept. Signature: _____ Date: _____

Director of Security Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Card Made:

Delivered/Date:

Returned Date:

(** For Metal Key Requests, please contact security.central@seattlecolleges.edu / 206-934-5442)