



**MOREHEAD STATE
UNIVERSITY**

Facility Key Request

Date Created:		Originator:	
Employee Information			
First:		Middle:	Last:
MSU ID:		Social Security Number (Last 4 digits): XXX-XX-	
Job Title:		Job Department:	
Employment Status:			
<input type="checkbox"/> Permanent Employee <input type="checkbox"/> Temporary Employee <input type="checkbox"/> Graduate Assistant <input type="checkbox"/> Student <input type="checkbox"/> Other (Please explain below in explanation box)			
Building/Room Information: <i>(Please list each building/room separately)</i>		Building/Room Information: <i>(Please list each building/room separately)</i>	
Building	Room	Building	Room
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Request Reason:		“Other” Request Reason Explanation:	
<input type="checkbox"/> New Hire <input type="checkbox"/> Transfer <input type="checkbox"/> Other		<i>(Please explain if Request if “Other”)</i>	
Key Information			
Type of Request:		Key Return Date: (mm/dd/yyyy)	
<input type="checkbox"/> New Key Request <input type="checkbox"/> Key Extension		<input type="text"/>	
		<i>(MUST be entered if Employment Status is not permanent or requesting Key Extension)</i>	

Approvals:

(Must be approved by a Department Dean/Chair, and appropriate Vice President)

Name: (Please Type/Print Approved Name)	Name: (Signature Required)	Approved Date:

Comment Information:

Approver Name:

Comments:

Approver Name:

Comments:

Approver Name:

Comments:

Approver Name:

Comments: