



KEY REQUEST FORM

PLEASE PRINT LEGIBLY

NAME: _____

E-MAIL ADDRESS:

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 @MIX.WVU.EDU

(Faculty and Staff are not required to submit an e-mail address)

PLEASE NOTE: INDIVIDUALS WILL BE NOTIFIED AS TO STATUS OF KEY ORDERS BY E-MAIL ONLY. IF YOU HAVE NOT PROVIDED AN ACCURATE ACTIVE E-MAIL ACCOUNT YOU MAY NOT BE CONTACTED IN A TIMELY MANNER.

Keys issued to students are for the academic period from Summer I through the Spring Term at which time all keys will be returned or upon the earlier exiting from the CCA, whichever occurs first. Students are responsible for lost or non-returned keys and shall pay a \$10.00 per key replacement fee.

Keys issued to faculty and staff are to be returned at the end of employment.

Please list **ROOM NUMBER(S)** for which you are requesting keys:

KEYS WILL NOT BE ISSUED WITHOUT THE APPROPRIATE SIGNATURES. STUDENTS ARE RESPONSIBLE FOR ACQUIRING THE SIGNATURES OF THEIR INSTRUCTORS AND CHAIR BEFORE RETURNING FORM TO THE OPERATIONS OFFICE FOR PROCESSING. PROCESSING REQUIRES A MINIMUM OF 72 HOURS FROM RECEIPT OF FORM IN THE OPERATIONS OFFICE.

SIGNATURES

Student: _____

Faculty: _____

Chair: _____

OFFICE USE ONLY