

<https://police.gmu.edu/forms/>



Forms

HOME / FORMS

Clery Act Reporting

- [Campus Security Authority \(CSA\) Crime Statistics Reporting Form](#)

<https://police.gmu.edu/forms/>

Complaint Form

Freedom of Information Act

- [FOIA Request for Public Records](#)

Public Safety Division Forms

- [Signature Card for Key Authorization](#)
- [Key Request Form](#)
- [Key Request Form \(for JC / SUB I / HUB\)](#)
- [Lost Key Report](#)
- [Door Information Request Form](#)
- [Policy for Electronic Security Management](#)
- [Standards for Employing Private Security](#)



Arlington: (703) 993-8207
 Fairfax: (703) 993-2823
 Sci & Tech: (703) 993-8369
 MSN 2A8 / keys@gmu.edu / hllcock@gmu.edu **

Public Safety Division, Key Control Office
 Department of Police and Public Safety, GMU

Key Request

Notice: All keys issued are to be returned directly to the Key Control Office to ensure campus safety. The transfer of keys between employees should be reported to our office, with a Key Transfer Form. The copying of university keys is prohibited per Virginia Law Code 18.2-503 and University Policy 48.

Last Name :	First Name :
Department :	Org. No. :
G.No. :	Work Title :
Email Address :	Phone No. :
Supervisor :	Department Head or Dean Name :
Department Billing Representative :	Department Billing Representative Email :

Reason for Key Request:
 New Staff Member New Space Assignment Replace Defective Key
 Lock Change Replace Lost Key Other: _____

FILL OUT REQUESTER INFORMATION COMPLETELY – CAN BE DONE BY REQUESTER OR DEPARTMENT ADMINISTRATOR

I, _____ (Print Name), understand that I am being entrusted with university key(s). I understand that I am held responsible for the key(s) issued to me. I agree to not share any key(s) issued to me to any other employee, faculty member, staff member, or student. I agree that upon my separation from the university, I will return the key(s) issued to me directly to the Key Control Office.

THIS SECTION CAN BE SIGNED BEFORE OR AT TIME OF PICK UP

Signature of Key Requestor _____ Date _____

Building	Room Number(s)	Key Serial Number(s) Issued (for Key Control staff use)	Initial upon receipt

FILL IN BUILDING AND ROOM # (s)

Attach additional paper if more space is needed.

I, _____ (Print Name), the Authorizing Agent (click to see the [Authorizing Agent list](#)), understand that I am responsible for all the keys issued to and disseminated within my department. The proper management and distribution of internal keys will ensure the safety and security of the university. I understand that I am subject to key inventory audits and must comply with annual audits. I understand that fees will apply for unreturned, or lost keys with additional cost from re-keying the locks.

AUTHORIZER SIGN AND DATE HERE SEND COMPLETED REQUEST TO KEYS@GMU.EDU

Signature of Authorizing Agent or Delegate _____ Date _____

Restricted Key Issuance

Certain keys are restricted such as exterior and master keys. Restricted keys will be issued only upon the recommendation of the respective Dean or Department Head and the approval of the Chief of Police. A clear justification of need must be attached.

Name of Dean and/or Department Head _____ Signature of Dean and/or Department Head	Name of Chief of Police _____ Signature of Chief of Police
--	--

IF REQUESTED KEYS REQUIRE ADDITIONAL SIGNATURES, KEY CONTROL WILL GET THE ADDITIONAL SIGNATURES

**For administrative and academic buildings, email requests to keys@gmu.edu. For housing and residents life buildings, email hllcock@gmu.edu.