

**University of California, Santa Cruz
Key Use Authorization Form**

Department: _____ Authorized by: _____

I authorize the listed employee/student to be issued the following keys/card keys for access to UC Santa Cruz facilities:

Name of key holder: _____ Job title: _____

<u>Key/Card Number</u>	<u>Building/Room</u>	<u>Date Issued*</u>	<u>Date Returned</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

*Key holder shall initial date of issuance and return for each key/card.

This form to be retained by the issuing unit.

**University of California, Santa Cruz
Key Acceptance and Use Agreement**

For and in consideration of the use of the above listed keys to the University's premises, the undersigned hereby acknowledges receipt of such keys, and **agrees to use such keys only in accordance with the UCSC Key Control and Access Policy, including the requirement that University Great Grand Master and Grand Master keys shall not be taken off campus except as required by official University business, and that University keys shall be secured at all times.** In the event any University key in the Key Holder's possession is lost or stolen, Key Holder agrees to report such loss of theft immediately to his/her unit. The undersigned agrees that the above keys remain the sole and exclusive property of the University while in the undersigned's possession and agrees to return all keys to his/her unit upon termination of University duties or upon one business day's prior request by the unit. In the event the undersigned fails to return any of the keys upon termination of University duties or within one business day of request by the unit, the undersigned agrees that a replacement fee of up to \$40 may be charged by the University for each key not returned. In addition, the undersigned agrees to reimburse the University the actual cost, up to \$100, of re-keying the lock(s) and agrees that the University may withhold such re-keying costs from key deposits due the undersigned.

The undersigned understands that any work order submitted to the lock shop for copies of the above keys must have signature authorization before the work order can be completed, and that the undersigned's name will be listed as the person responsible for the sub-numbered keys in unit records.

Signature of person receiving key(s)

Date

Print Name

This form to be retained by the issuing unit.