

# AME Key Request Form

Keys are requested for the following individual:

Name: \_\_\_\_\_

EID: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

CAT Card #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Title or Position: \_\_\_\_\_

Status:      Faculty                       Staff                       Visitor   
                 Graduate Student               Undergraduate Student       Post Doctorate

## Keys Requested:

Room #s: \_\_\_\_\_

Building Key\*: \_\_\_\_\_      Mail Room Key: \_\_\_\_\_      Desk Key: \_\_\_\_\_

## AME Key Agreement :

I have been authorized to receive the key(s) stated above:

I understand that I am responsible for the above issued key(s) and will not lend or transfer these keys to any other individual. I will return these keys to Dianne Smith in room N705 upon graduation, withdrawal from AME Department, or completion of work and/or assignment. ***I agree to pay a \$25 key deposit upon issuance of any AME room or building key(s). I understand that this amount is refundable only upon return of any and all keys that have been issued in my name. If you pay by check, please make check payable to the University of Arizona.***

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

FACULTY / SUPERVISOR APPROVAL: \_\_\_\_\_ DATE: \_\_\_\_\_

DEPARTMENT HEAD APPROVAL\*: \_\_\_\_\_ DATE: \_\_\_\_\_

## FOR AME OFFICE USE ONLY:

Date of deposit: \_\_\_\_\_

Method of payment: \_\_\_\_\_ cash      \_\_\_\_\_ check, check # \_\_\_\_\_

Received by: \_\_\_\_\_

DDF# \_\_\_\_\_

