



| |
|-----------------|
| Received: _____ |
| PKC: _____ |

College Resource Coordinator
eng.resourceoffice@usask.ca
 306.966.5304

Key Return/Pickup in room 1B97.3
 3:00 pm - 4:00 pm
 Mon – Fri

Have you had keys at the University of Saskatchewan before?

Yes | No

College Key Request Form

Fillable PDF form: An incomplete form will be returned.

Key Holder Information

Type of Request:

Staff or Faculty Grad Student Sessional Faculty
 Undergrad Student Group Visitor Other: _____

****Note: You will receive an email from eng.resourceoffice@usask.ca when your keys are ready for pick up. You will be asked to show ID upon pick up as of April 1, 2016. Keys are only handed out to the key holder.***

Have you read the college's Emergency Response Plan (ERP)?

College of Engineering ERP

Yes | No

| | | |
|--------------------|--|--|
| Name (Last) | Name (First) | NSID *Mandatory |
| Start Date | End Date (when you will no longer require key/s) | Contact email address (if different from NSID) |
| Department/Program | | Contact Phone Number |

Key(s) Requesting

Keys Required for Room(s):

Do you require after hour access to the Engineering Building? Yes | No

If so, please provide the reason below:

****Note: If a lab space is requested, attach final signed orientation checklist confirming safety training has been completed.**

Safety Orientation Checklist

Engineering Building Hours

| Fall and Winter Terms (September - April) | |
|---|---|
| Monday - Friday | 7:30 a.m. - 9:00 p.m. |
| Saturdays & Sundays | 9:00 a.m. - 9:00 p.m. |
| Statutory Holidays | CLOSED (Engineering Building Locked) |
| EXCEPTION: December 24 | 7:30 a.m. - 4:30 p.m. (University closes at 3:00 p.m.) |
| EXCEPTION: December 25 - January 1 | CLOSED (Engineering Building locked) |

| Spring and Summer Terms (May - August) | |
|---|--------------------------------------|
| Monday - Friday | 7:30 a.m. - 6:00 p.m. |
| Saturday, Sunday and Statutory Holidays | CLOSED (Engineering Building locked) |

Approval

Supervisor Approval

Name Signature phone Date

Department Head/Designate Approval

Name Signature phone Date

Key Custodian

****to be completed by the key custodian only**

Indicate key(s) applied for:

(Check box confirming correct keys have been received from FMD)

_____ _____ _____ _____
 _____ _____ _____ _____

FMD Request # _____

Date Requested: _____

_____ Date Arrived

Key Holder Emailed

College Key Lending Policy

****to be completed when picking-up key(s)**

As the key holder you understand and agree to the following:

1. These keys are property of the University of Saskatchewan and are on loan to you while you are employed or visiting the College of Engineering, and it is your responsibility to keep your keys safe and within your possession. _____(initial)
2. You are responsible for immediately reporting keys which are lost or stolen to the college key custodian. _____(initial)
3. It is a violation of University policy to lend these keys to others, to use these keys to provide other individuals access to rooms these keys open, and to make copies or duplicate in any manner the keys authorized for your individual use. _____(initial)
4. These specific keys are coded to your personal NSID, these exact keys will be returned upon the completion of your contract of employment or program to the key custodian. _____(initial)

Key holder Signature (you have understood the policy, and accept responsibility for these keys)

Name Signature Date