

**BUILDINGS AND GROUNDS, BENDIGO**

 REQ NO  
 (Office Use Only)

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## REQUISITION FORM - KEYS AND SECURITY ACCESS CARD

This form is to be used specifically for requisitioning the cutting and supply of keys and security access card activation.

For security reasons this request must be approved and countersigned by the Head of Department before forwarding to the Buildings and Grounds, Bendigo Office.

<b>NAME OF HOLDER</b> (one Form per person)	<b>STAFF / STUDENT / OTHER</b>
<b>DEPARTMENT / SECTION</b>	
<b>DATE</b>	
<b>APPROVED BY HEAD OF DEPT.</b>	Signature :
<b>PLEASE PRINT NAME</b>	Full Name :

**BUILDING NAME(S):** \_\_\_\_\_

**FLOOR LEVEL(S):** \_\_\_\_\_

**ROOM NUMBER(S):** \_\_\_\_\_

**KEY CODE(S):** \_\_\_\_\_

**HOW MANY KEYS REQUESTED:** \_\_\_\_\_

**AFTER HOURS SECURITY CARD ACCESS TO BUILDING REQUIRED:**      YES       NO

**INTERNAL SECURITY CARD ACCESS:**

Please Note - Staff Cards are automatically activated to Classrooms/Lecture Theatres and Student Cards are automatically activated to the Main Computing Labs.

If Other Room(s) require Security Card Access (e.g., Laboratories), indicate Room Number(s) below:

\_\_\_\_\_

**HONORARY/SESSIONAL/CONTRACT POSITION:**      YES       NO

**CONTRACT EXPIRY DATE :**      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**PERMANENT POSITION:**      YES       NO

**EMERITUS SCHOLAR**      YES       NO

**STAFF/STUDENT I.D. NUMBER:**      \_\_\_\_\_

OFFICE USE ONLY							
DATE		ACTION BY		APPROVED		COMPLETED	
SIGNATURE : _____				DATE : _____ / _____ / _____			