



KEY AUTHORIZATION FORM

Work Order #: FS- _____

Key Holder Information

Date:	Key Holder Email:
Key Holder Name/Title:	Key Holder WSU ID:
Department:	
Building/Room:	
Campus Phone Number:	

Approval Signatures

Employee (Signature)

Department Chair (Signature)

TO BE COMPLETED BY KEY HOLDER (One Key Per Person Per Room)			FOR LOCKSMITH STAFF ONLY		
Quantity	Room #	Building	Key Code	Issue/ Return Date	Signature

IMPORTANT POLICY STATEMENT FACTS:

1. Complete form, obtain appropriate signature(s) and bring with you upon key pickup from Lockshop.
2. CONFIRMATION will be sent via email for receipt of key request and NOTIFICATION via email to pick up key(s).
3. Key holder must pick up key(s) and bring WSU ID Card.
4. Key(s) can be picked up at the Lockshop located in the Gaddis Physical Plant during the hours of **Monday- Friday 8:00am-9:00am or 3:00pm-4:00pm.**
5. No keys will be issued outside of these pickup hours. No exceptions.
6. Key holder must return key(s) to Locksmith upon request or termination.
7. Wichita State University key(s) are not to be duplicated.
8. Please contact KeyRequest@wichita.edu with any questions.

PLEASE ALLOW AT LEAST 2 BUSINESS DAYS TO PROCESS KEY REQUEST

Lockshop Email: KeyRequest@wichita.edu

Locksmith Contacts: Travis Snodgrass (316) 978-7922 and Joseph Asbridge (316) 978-7923. If unable to contact Locksmiths, please contact the front office at (316) 978-3444