



Facilities Services Key Release Form

The purpose of this form is to be able to record Department Chair/ Dean authorized signatures. This form authorizes a certain person in a department, other than the dean or chair themselves, to be approved to sign requests for any keys from said department. Please complete the following and return to Facilities Services.

AUTHORIZED SIGNATURE(S)

Please sign the following and submit to Facilities Services, to give approval for another person in your department to authorize key requests.

I, _____ (Department Head for _____), give permission to _____ to sign any key requests from our department. Other than myself, this is the only other person authorized to approve key requests from my department.

SIGNATURES:

Department Head

WSU ID