



## Key Issuance Agreement

RECIPIENT INFORMATION:

Name: \_\_\_\_\_ Molloy ID # \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

KEY INFORMATION:

Location (Building and Room Number) \_\_\_\_\_

Date Issued: \_\_\_\_\_ Date Returned: \_\_\_\_\_

*All key requests must be approved* by the Vice President of Student Affairs or the Assistant Vice President for Facilities. Keys will be issued only when there is a demonstrated need for the person(s) to have access to any Molloy University facilities. Employment alone does not necessarily justify the issuance of keys.

The affidavit below ***MUST*** be signed by the person(s) receiving the requested key access.

**I understand and agree that:**

1. The key(s) issued to me are for Molloy University business purposes only.
2. When I enter or leave a locked building/room I will not permit any individual to enter who does not have keys to enter that area at that time.
3. When I enter or leave a locked building/room I am responsible for securing the entrance/exit and may be held responsible for any loss or damage to university property resulting from my failure to do so.
4. I shall not duplicate or cut the key(s).
5. I shall not transfer, share, or loan the key(s) to any other individuals.
6. All key issued to me remain the property of Molloy University and I will return them to my supervisor if:
  - a. I transfer to another department or building
  - b. I am terminated, retire, or resign
  - c. My supervisor requests that I do so
7. If my key(s) are lost or stolen, I will report the loss/theft immediately to Public Safety.
8. If I lose my key(s), I may be subject to disciplinary action up to and including termination. In certain situations, I may be required to cover the cost involved in replacing the key(s) and/or to change the lock(s).

\_\_\_\_\_  
Signature of requester

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorizing Signature (VP or Supervisor)

\_\_\_\_\_  
Date