

KEYCARD REQUEST

Return this form to the Facilities office to obtain a new or replacement keycard to access your building(s).

Type of Request: New Replacement* *Reason (circle one): Broken Lost Stolen

Name:	KUSD Employee ID #: <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								
Position:	For security purposes, all NEW employees must list their KUSD Employee ID #. -----								
Building(s):	If you are not a district employee, complete the section below: Non-KUSD Position Type (Select one) <input type="checkbox"/> Contract/Agency <input type="checkbox"/> Vendor <input type="checkbox"/> Internship/Student <input type="checkbox"/> Other: _____								

By my signature and submission of this request, I understand & agree to the following:

- I certify that the information I have provided on this form is accurate and truthful.
- The keycard I receive is property of KUSD and is not transferable. It will remain in my possession for the duration of my employment (or term), and will be returned upon separation from KUSD.
- I will not loan, share, transfer possession of, misuse, or alter the keycard in any way.
- In the event my keycard is damaged, misplaced, lost, or stolen, I will promptly notify Facilities and it will be my responsibility to pay the \$10 replacement fee to obtain a replacement keycard.

Signature: _____ Date: _____

NOTE: Keycards are not instantly activated upon issue. Activation typically occurs 24-48 hours after keycard is issued.

Already have a keycard? If you only need to update the buildings on a current keycard, do NOT fill out this form! To have an existing keycard reprogrammed or reactivated, please e-mail your name, position, building(s), and keycard # to keycard@kUSD.edu.

Please drop-off or mail this form to the Facilities Office – Attn: Taryn Neff



FACILITIES USE ONLY				(Do not write in this area)	
Keycard #	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Issued: _____
New	Replacement	Fee Rcv'd:	Yes	N/A	Sent to SL: _____
Pick Up	Mail	Payment:	Cash	Check #	_____