## HOBART & WILLIAM SMITH COLLEGES KEY REQUEST FORM

Please print, complete, and submit to B&G (facilities@hws.edu, fax 781-3909 or campus mail)

To: BUILDINGS & GROUNDS	Date:
Requestor:	
*Department Chair Signature:	
Phone # / Ext	_
Issue Key To:	9 Faculty 9 Staff 9 Student (Please check one)
Department:	Return Date:
Building:	Department:
Room #:	Description:
Master Key:	Description:
Sub Master Kev:	Description:

<sup>\*</sup>Department Chair's signature must be provided