CTSA Key Checkout Guidelines

The policy for key checkout in the CTSA is to provide faculty, staff and students with the keys that they need in order to perform their various duties. Keys will be distributed based on the following guidelines:

- Students will be given a metal key(s) at no charge; however, a fee of \$\frac{\\$100.00}{\$}\$ per metal key will be invoiced to the student's Zot Account for each key that is lost or not returned by the agreed upon date. Unpaid invoices may result in being dropped from classes, prevent you from future registration, transcripts or diploma held, etc.
- **Faculty** and **Staff** will be given a metal key(s) at no charge; however, a charge of \$40.00 will be required for each replacement key.
- **Key cards** will be issued at no charge. There will be a non-refundable fee of \$15.00 for each lost key card.
- Metal Keys and Key Cards must be returned to the CTSA Key Office by the Due Date.

CTSA Key Checkout Procedure

- 1. Complete "Personal Information" section on the key request form: Please be sure to fill in everything, as omissions may cause a delay in issuing your key(s).
- 2. Indicate both the Building and Room for the needed key(s).
- 3. Have your department manager or supervisor complete the "Keys to be returned by date" section.
- 4. Have your department manager or supervisor sign the form.
- 5. Sign the bottom of the "CTSA Key Checkout Guidelines" sheet and the "Acknowledgment of Responsibility" after reading the Acknowledgment of Responsibility.
- 6. Bring the completed form to the Dean's Office front desk in the Mesa Arts Building. (2nd floor). Your key(s) will be ready for pick up 24 hours after the form has been dropped off.
- 7. Pick up your key(s) at the Dean's Office front desk in the Mesa Arts Building. $(2^{nd} floor)$

If you have any questions, please send an email to ArtsFacilities@uci.edu

I have read and understand the above Guidelines and Procedure.	
Signature:	Date:
Name Printed:	

Claire Trevor School of the Arts University of California, Irvine

Key Request

Personal Information						
Last Name: Cell Phone: Permanent Address:						
						City: St:
		CTSA Affiliation (check one): Faculty Staff		Graduate	Underg	graduate
Employee / Student ID Number:						
Keys Requested:						
Building AND Room	Key Number	Stamp Number	Date Issued	Date Due	Date Returned	
Acknowledgement of Responsibility I hereby accept responsibility for all L regard to security of University prope the only person authorized to use key unauthorized persons. I understand to card is \$15. I understand that my Zot assigned to me are returned to the U	erty within the confi ys assigned to me ar hat the replacemen Account will be bille	nes of space assigr nd I will not allow t t cost for EACH me	ned to me. I un the use of my k etal key is \$100	derstand that ey(s) by and EACH los	I am st key	
Key Recipient Signatu	re:					
CTSA Department:						
Supervisor/Department Authority Na	me (Printed):					
Supervisor/ Department Authority Sig	gnature:			Date: _		
	CTSA USE ON	ILY-LATE/LOST IN\	/OICING			
CTSA Signature:		_ Date:				
KFS Processing: Delivered on: _						
Ki 3 Frocessing. Delivered on:						