KEY CARD AUTHORIZATION FORM
Please use only one form per person.

Please fill out the top part of this form, attach a copy of your receipt, and submit to Campus Computing in Bay 226. Key cards can be purchased at: www.usfsp.edu/computing/cardpayment

APPLICANT NAME (PRINT):

USF EMAIL ADDRESS:

COLLEGE, DEPARTMENT OR GROUP:

EMPLOYMENT STATUS: □ STAFF □ FACULTY □ ADJUNCT □ STUDENT □ OTHER

TELEPHONE:

WOULD YOU LIKE A KEY CARD OR KEY FOB? □ KEY CARD □ KEY FOB

REQUESTED LOCATION(S) AND JUSTIFICATION:

If you are paying with Chart fields, please fill out the information below:

<table>
<thead>
<tr>
<th>Op. Unit</th>
<th>Department</th>
<th>Fund</th>
<th>Product</th>
<th>Initiative</th>
<th>Project</th>
</tr>
</thead>
</table>

__________________________
Approver Signature*

__________________________
Print

__________________________
Date

*PLEASE NOTE THE CARD RECIPIENT CANNOT SIGN AS THE APPROVER. ACCOUNTABLE OFFICER, DESIGNEE, OR REQ APPROVER/MANAGER SIGNATURE IS REQUIRED IF CHART FIELDS ARE BEING USED.

CONTROL OF KEYS IS ESSENTIAL TO YOUR CAMPUS SECURITY. DO NOT MAKE UNAUTHORIZED DUPLICATES OF CARDS. DO NOT LEND OUT YOUR CARD. RETURN ALL KEYS TO THE CAMPUS COMPUTING DEPARTMENT (BAY 226).

CAMPUS COMPUTING USE ONLY

INCIDENT NUMBER: ____________________________

DATE ISSUED: ____________________________ [ ] Applicant has been notified for pick up.

CARD/FOB RECEIVED BY: ____________________________

CAMPUS COMPUTING: ____________________________