

**Bridgewater State University  
Key/Access Card Request/Authorization Form  
Bridgewater State University Employees  
Includes Residence Hall Use**

*(Fill in all areas. Please print or type.)*

Date: \_\_\_\_\_ Connect Card ID#: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Department: \_\_\_\_\_ Full or Part Time *(Please circle one)*  
Phone Ext.: \_\_\_\_\_

**Part A**

Key requested for:

Location: Building \_\_\_\_\_ Room \_\_\_\_\_

Justification: \_\_\_\_\_

\_\_\_\_\_

**Part B**

Building Access Card:  
Building: \_\_\_\_\_  
Days: \_\_\_\_\_  
Time: \_\_\_\_\_

**Part C**

This access replaces any current access:  
Yes or No  
Expiration Date: \_\_\_\_\_

Justification: \_\_\_\_\_

**SIGNATURES ARE REQUIRED FOR AUTHORIZATION OF KEY(S) AND ACCESS CARD(S).**

**Authorization Sequences**

\_\_\_\_\_  
Dept. Head/Director/Dean or Chairperson Date  
(Print Name & Sign)

\_\_\_\_\_  
Building Coordinator (if applicable) Date

\_\_\_\_\_  
Director, Residence Life & Housing (if applicable) Date

\_\_\_\_\_  
Director of Physical Plant Date

**When authorization has been completed, forward requests for keys to:**

**Facilities Management & Planning - Customer Service  
200 Great Hill Drive, Operations Center**

When notified, keys may be picked up in the same location between the hours of 8 a.m. and 4:30 p.m., Monday through Friday. The individual requesting the key(s) must pick up the key(s) in person. Key(s) will be issued to the person upon presentation of their BSU Connect Card ID.