Key Agreement Form

Miami Dade College Hialeah Campus

Persons to whom keys to College facilities are issued and their supervisor are required to understand and agree to the following terms and conditions prior to gaining access to requested College facilities. Please note that the term key(s) is used for any type of access tool issued to enter a College facility.

☐ All key requests must be approved by the Director of Administrative Support Services.
☐ Keys will be issued only where there is a demonstrated need for persons to have access to College facilities. Employment does not necessarily justify the issuance of keys.
☐ Keys are issued for entry to College buildings for the purpose of conducting College business only.
☐ Accountability for keys rests with the individual who last signed for them.
☐ An authorized employee entering or leaving a locked building will not permit any individual to enter who does not have keys to enter that area at that time.
☐ College keys shall not be duplicated or cut without prior approval from Campus Administration. No locks may be changed or removed from this key-way.
☐ Buildings must be locked after official business hours to maintain the security of both buildings and their contents.
☐ An employee entering or leaving a locked building will be responsible for securing the entrance/exit and may be held responsible for any loss or damage to College property resulting from failure to do so.
☐ In no case is a key of any type to be transferred from one individual to another or to be obtained from any source other than the Campus Public Safety Office.
☐ All keys issued remain the property of the College and will be returned if:
  1. Employee transfers to another department or building.
  2. Employee is terminated, retires or resigns.
  3. Requested by an appropriate supervisor.
  4. Employee is granted a leave of absence without pay for a period of 30 or more calendar days.
☐ Employees that lose a key due (depending on the severity of each case) may be subject to disciplinary action up to and including termination. In some cases the employee may be required to cover the cost involved in replacing a lock(s) due to the loss of a key.
  1. Lost, broken, and/or stolen keys must be reported in writing to the supervisor or department head and the Campus Public Safety Office. This report must be submitted within twenty-four (24) hours to Campus Public Safety.
  2. Broken key pieces will be requested when a broken key is reported.
  3. Keys reported stolen as part of another theft will require a police case number.
☐ Any keys not picked up within thirty days after notification will be returned to the Plant Maintenance Department.

 Supervisor Acknowledgement:

 Supervisor Name & MDID:

 Supervisor Signature:

 Date of Signature:

 Employee Acknowledgement:

 Employee Name & MDID:

 Employee Signature:

 Date of Signature:

Reviewed 02/01/2010
AMF
Key Control Form

Miami Dade College Hialeah Campus

PRINT CLEARLY IN INK

DATE: ____________________________

RECIPIENT INFORMATION:

LAST NAME: ____________________________ FIRST NAME: ____________________________

MDID#: ____________________________ PERSONAL PHONE#: ____________________________

HOME ADDRESS: ____________________________

DEPARTMENT: ____________________________ SUPERVISOR NAME & EXT: ____________________________

EMAIL ADDRESS: ____________________________ OFFICE PHONE#: ____________________________

KEY INFORMATION:

KEY ROOM #: ____________________________ ROOM TYPE: ____________________________

LOST or STOLEN KEY Y/N: ____________________________ (If yes please complete a Lost Key Form prior to issuing key)

RETURN DATE (if applicable): ____________________________ RECEIVED BY (Print & Sign): ____________________________

RETURNED TO PLANT MAINTENANCE: ____________________________ VERIFIED RECEIVED DATE: ____________________________

ISSUER INFORMATION:

LAST NAME: ____________________________ FIRST NAME: ____________________________ TITLE: ____________________________

SIGNATURE: ____________________________

Key Agreement:

“By signing below I recognize that the key(s) issued to me today is the property of Miami Dade College. I accept responsibility for its use and security. I understand that the key(s) is not to be duplicated nor transferred to any other individual. I understand that failure to follow these terms and those specified in the Key Agreement Form may result in disciplinary action up to and including termination.”

Number of Keys Received: ____________________________

Room # (s) ____________________________________________

Date of Issuance: ____________________________ Recipient Signature: ____________________________

Reviewed 02/01/2010

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