

SFA School of Music Key Request Form

NAME _____

ID# _____

Key(s) Requested:

_____ Band Managers

_____ Piano*

_____ Choir

_____ Harp*

_____ Classroom

_____ Percussion*

_____ SRT

_____ Composition Room*

_____ Other _____

***A \$5 nonrefundable deposit is required for access to these rooms each semester. A receipt from the Business Office is required before a key will be issued.**

Reason for Request:

Faculty Approval _____ **Date** _____

For those not paying a deposit: I agree to **return the key(s)** no later than the last day of the semester each term. I understand that in the event I do not return the key(s), my grades may be withheld. I agree to pay \$10.00 for each key turned in late. I also agree to pay actual University cost (to be determined by the University locksmith) to re-key each door to which a key is not returned.

I state that I alone will use this key and that I will not transfer it to any other student. I further state that I will be responsible for using the equipment in an appropriate manner, will not bring food or drink of any kind into the rooms, and will pay the full cost of any damage to the equipment in these rooms.

Signature _____ **Date** _____

Date Key was issued: _____

For Office Use Only:

Deposit Into Music _____

Fund 150010
Org 23200
Acct 55601
Prog 100