Dept _____
Employment Status_____

Oregon State UNIVERSITY OSU College of Forestry

KEY REQUEST AND SURETY AGREEMENT FOR KEYS ISSUED

For issuance of University keys, and in lieu of payment of a $50.00 key deposit/key:

I, _____, the undersigned individual, hereby agree to return the keys listed below to the College Business Office upon demand, or when they are no longer needed in the course of my University employment or studies. In the event any key is lost or otherwise unavailable to turn in, I hereby agree to pay the amount set forth below and authorize Oregon State University to deduct the value stated below, or the current key deposit value at the time, whichever is greater, from my paycheck. If key control terms are contained in an applicable collective bargaining agreement, those terms apply. If a student, I further understand that a debt to the University can result in a "hold" on any release of transcript request.

If not a University employee or student, I agree to pay $50.00, or the current key deposit value, whichever is greater, for any key lost or unavailable to return.

Keys to University facilities are State property. A key deposit or written agreement for any key issued is mandatory – policies and procedures are governed by:

- Oregon Revised Statutes 351.070 and 293.445
- Oregon Administrative Rules
- Oregon State University Administrative Policies and Procedures
- Oregon State University Faculty Handbook
- OPEU Collective Bargaining Agreement

As a keyholder, you share in the responsibility for building and forest safety and security. You must immediately report any key loss and any insecure conditions.

Key #	Return Date	Returned To:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total $: _____

I acknowledge receipt of the above key(s) and understand my responsibilities for the control and return of, or payment for, said key(s).

Phone Number: _____ e-mail: _____

Signature: _____Date_____

Key Issue Approved by: _____Date_____
Department Head

Waiver Approved by: _____Date_____
Director of Operations

Date logged into computer file: _____ Date deleted from computer file: _____