WPU Missing Key Report

Contact Person _____ Ext_____

Key Holder _____

Department _____

Are you requesting another key? Yes ☐ No ☐

Dean or Director ..... _____ _____

Print or Type Name *Signature* *Date*

Key Information

Key Number	Doors Operated By Key	*Office Use Only*

Loss or Theft Information

Date of Loss or Theft Location of Loss or Theft

On-Campus ☐ Off-Campus ☐ Uncertain Circumstances of Loss or Theft ☐

Were there any identifying WPU marks on the key or key ring indicating that the key? ☐ Yes ☐ No

If yes, please describe the markings (WPU keychain, etc.) _____

Campus Safety Recommendation

Re-Key Affected Door(s) ☐ Replace Old Key ☐ Record Missing Status Only ☐

Campus Safety Director _____ Date _____

Comments:_____

Facilities Services Recommendation

Re-Key Affected Door(s) ☐ Replace Old Key ☐ Record Missing Status Only ☐

Director of Facilities_____ Date_____

Comments:_____

Office Use Only	Work Order	Order Date	Date Completed	Amount Billied