

# UCI Is a Smoke-Free and Tobacco-Free Campus



University of California, Irvine  
CALIT2  
Key (or Keycard) Issuance Form

Return completed form to Ryan Smith, Calit2 office 3411 - sryan@uci.edu

**BOLD \*asterisk field REQUIRED**

<b>*Last Name:</b> _____	<b>*First Name:</b> _____
Dept. Name: _____	Title: _____
<b>*UCI Employee or Student ID#:</b> _____	
<i>Non-UCI Applicants Please Provide Valid Drivers License #</i>	
<b>*E-Mail:</b> _____	<b>*Mobile Phone:</b> _____
Address: _____	Other Phone: _____
_____	_____
Card/Key issuance -	<b>*Begin Date:</b> _____ <b>*End Date:</b> _____
<b>*Name of Authorized Calit2 Staff or Lab Manager:</b> _____	
<b>*Home Department Principal Investigator (PI):</b> _____	

\_\_\_\_\_  
\*Signature of **Calit2** Staff or Lab Manager (email is also acceptable)

\_\_\_\_\_  
**CALIT2 Approval for Issuance**

**\*Lab Users must provide current UCLC training certification documents**

*Room or cubicle#	Card /Key #	Serial #	Issuance Date	Return Date	Deposit / BKPR Initials
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**\*\*\*DO NOT PUNCH HOLES IN CARD KEYS - This will disable their functionality**

## Agreement:

### To be completed at time of key pick-up

It is understood and agreed that:

*Initial each statement*

- ☐ \$15.00 deposit for each key card issued - \$15.00 for each hard key issued.  
Deposit will be refunded upon return of key card and/or hard key to CALIT2 office.
- ☐ I am responsible for the university key(s) issued to me and I will report its loss/theft immediately in writing. I understand that I will forfeit my deposit should my key(s) be lost, stolen, damaged or altered in any way such that it renders the key(s) unusable and will be required to submit an additional deposit for replacement of key(s).
- ☐ The key(s) issued to me may not be reproduced, except by the University of California, Irvine.
- ☐ The key(s) are to be returned immediately to the Calit2 Facilities Manager upon termination of employment and/or if the occupant is no longer involved with the project for which workspace has been assigned to them in the Calit2 building.
- ☐ I am responsible for reading and complying with CALIT2 building policies, a copy of which I have received.

I understand the above agreement:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date