NAVAL MEDICAL RESEARCH UNIT
SAN ANTONIO

KEY CONTROL REQUEST FORM

I have received the following key(s)

KEY ID	FUNCTION

It is important to note that the function of the key(s) may vary. Some of the locks are used every day, while others are used to secure doors only if a malfunction or power outage causes the magnetic locks to fail. I will become familiar with the function of each key I am issued and understand that I may be called upon to provide back-up security measures if situations warrant.

Name: _____

Work Phone: _____

Signature: _____ Date: _____

Issued by: _____

Date key(s) returned: _____

Received by: _____