![North Seattle College logo]

KEY RETURN FORM

Received From:

Date: ____/____/_____

Name: _____ _____ _____

| Last | First | M.I. |

NSCC SID#: _____ Complete Dept. Phone#: __ __ __-__ __ __ __

Mail Stop: _____ Dept.: _____ Email: _____

Check One: ___Faculty   ___Staff   ___Student   ___Other (Tenant)   ___ Contractor

Card #: _____ Card Access Authorization Expires: _____

Bldg./Rm #:	Description:	Key I.D. Code #
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Received By:

_____   _____   ____/_____/_____
Signature (Security)   Print   Date

_____   _____   ____/_____/_____
Signature (Lock Shop)   Print   Date