

# CCNY CYLINDER APPLICATION

## **CAMPUS PLANNING & FACILITIES MANAGEMENT**

DEPARTMENT: \_\_\_\_\_

**Please Read:**

- \* I UNDERSTAND THAT THIS CYLINDER & KEY IS COLLEGE PROPERTY AND IS FOR MY USE ONLY
- \* I WILL NOT SELL, GIVE OR LEND THE KEY TO ANYONE
- \* I WILL NOT DUPLICATE THE KEY
- \* I WILL IMMEDIATELY INFORM THE PUBLIC SAFETY OFFICE, IN WRITING, IF I LOSE THE KEY
- \* I WILL RETURN THE KEY TO PUBLIC SAFETY UPON MY SEPARATION FROM THE COLLEGE

NAME	BUILDING	ROOM	REASON FOR CHANGE

**KEYS ARE ISSUED TO FACULTY AND STAFF AND MUST BE APPROVED BY A DEAN,  
CHAIRPERSON OR DEPT. HEAD**

**A SIGNATURE AND PRINTED NAME IS REQUIRED**

DEAN OR CHAIRPERSON'S PRINTED NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

To submit this form:

- 1) Deliver to Facilities Office in the Compton Goethals Building Room 04
- 2) Submit the request via email. Since it is a PDF document you will have to print it out and have the appropriate Dean, Chairperson or Department Head sign it then scan and email it to [Keyrequest@ccny.cuny.edu](mailto:Keyrequest@ccny.cuny.edu).
- 3) You may also fax it to (212) 650-6874.

THE FACILITIES OFFICE WILL CONTACT YOU WHEN THE KEYS ARE READY. KEYS CAN BE PICKED UP IN COMPTON GOETHALS ROOM 04 BETWEEN THE HOURS OF 8:30 AM - 4:30 PM.

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(Facilities Use Only)

PRINT NAME: \_\_\_\_\_ PICK-UP DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Work Order #: \_\_\_\_\_