

LOST KEY REPORT

**DIRECTIONS: (1) PHONE School Safety (x 2214) as soon as possible after determining that a key has been lost.
(2) COMPLETE LOST KEY REPORT - Must be filed with School Safety Office within 24 hours.**

School/Department	<input type="text"/>	Date of Report	<input type="text"/>
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Date of Loss	<input type="text"/>	Approximate time	<input type="text"/>
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Type of Key(s)	<input type="text"/>	Serial/Key Numbers	<input type="text"/>
Person Key(s) Assigned to	<input type="text"/>		

Indicate all facilities / area keys will allow access	<input type="text"/>
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How and where were keys Lost?	<input type="text"/>
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How could this loss have been prevented?	<input type="text"/>
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Work Order #:	<input type="text"/>	Signature of person reporting loss/missing keys	<input type="text"/>
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Use reverse side for additional information, if needed

FORWARDED

**Principal/
Immediate Supervisor**

Date _____

**Date Received in School Safety Office:
Security Follow-up:**

Payment received in Accounting: Payment Received by:

Date forwarded to Maintenance: Date Maintenance Received:

Date Key(s) Re-issued: Keys Issued by: