



Lynwood Unified School District

11321 BULLIS ROAD
LYNWOOD, CA 90262
(310) 603-1491 Fax (310)605-0540

KEY, ID BADGE, AND ACCESS CARD REQUEST FORM

EMPLOYEE NAME: _____ REQUESTED DATE: ____/____/____

SCHOOL / DEPARTMENT NAME: _____

REPLACEMENT FEES		
☐ ELECTRONIC KEY BOX	☐ *LOANER KEY (FOB) - \$30 Plus Key(s)	☐ BROKEN KEY - NO FEE
☐ NEW ASSIGNMENT	☐ *LOST OR STOLEN KEY \$30 Fee Each	☐ *CABINET KEY(S) OR ELEVATOR \$10
☐ ID BADGE & ACCESS CARD	☐ LOST OR STOLEN ID \$10	☐ *MEDECO ELECTRONIC CLIQ KEY
☐ OTHER:	☐ LOST OR STOLEN ACCESS CARD \$10	\$200
Police & site campus safety report required for lost or stolen items		
<u>CASH ONLY (Exact Amount)</u>		

ADMINISTRATOR APPROVAL: _____

QUANTITY	KEY NO.	ROOM NO.	COST OF WORK
WORK PERFORMED BY:	COST	HOURS	DESCRIPTION OF WORK PERFORMED

The employee agrees to surrender District keys when requested to do so by any LYNWOOD UNIFIED SCHOOL DISTRICT Administrator. LYNWOOD UNIFIED SCHOOL DISTRICT reserves the right to withhold the last payroll warrant until the above listed items are returned. Key holder will be responsible for the cost of replacements for all keys, labor and material.

CAL. PENAL CODE § 469. ANY PERSON WHO KNOWINGLY MAKES, DUPLICATES, CAUSES TO BE DUPLICATED, OR USES, OR ATTEMPTS TO MAKE, DUPLICATE, CAUSE TO BE DUPLICATED, OR USE, OR HAS IN HIS/HER POSSESSION ANY KEY TO A BUILDING OR OTHER AREA OWNED, OPERATED, OR CONTROLLED BY THE STATE OF CALIFORNIA, ANY STATE AGENCY, BOARD, OR COMMISSION, A COUNTY, CITY, OR ANY PUBLIC SCHOOL OR COMMUNITY COLLEGE DISTRICT WITHOUT AUTHORIZATION FROM THE PERSON IN CHARGE OF SUCH BUILDING OR AREA OR HIS/HER DESIGNATED REPRESENTATIVE AND WITH KNOWLEDGE OF THE LACK OF SUCH AUTHORIZATION IS GUILTY OF A MISDEMEANOR.

MY SIGNATURE BELOW ACKNOWLEDGES THAT I HAVE READ AND UNDERSTAND ALL OF THE ABOVE.

KEY HOLDER'S SIGNATURE: _____ DATE: ____/____/____

PRINT NAME: _____

ORIGINAL FORM MUST BE RETURNED TO THE LOCKSMITH DEPARTMENT

Revised 1/19/2023