

Texas A&M University
Department of Chemistry

Key Request

Name: _____

UIN: _____

Room(s): _____

Date: _____

Length of Stay: Permanent: _____ Temporary: _____ How Long? _____

Office Phone Number: _____ Home Phone Number: _____

Email: _____

Has this individual completed General and Work Area Specific Safety Training: _____
(Keys will not be issued if required Hazardous Communication Program Safety Training has not been completed.)

Is this request for teaching? Yes: _____ No: _____ If yes, Course #: _____

Is this request for research? Yes: _____ No: _____

Is this individual:

- A TAMU Faculty/Dept. Staff _____
- A TAMU Research Staff _____
- A TAMU Student
 - Graduate _____
 - Undergraduate _____
- An Approved Visiting Scholar _____

Advisor: _____

(Print Name)

Advisor's Signature [Required]

Please return this form to Chemistry Building Room 122.

Office Use Only

Approved: _____

Hook Number: _____

Key Number: _____

Room(s): _____

Completed General & Work Area Specific Hazardous Communications Program Training: _____

Employment Status in Department: _____