

UNCW SPONSOR FORM

Date Sent (m/d/yy): _____ Sheet 1 of _____

SEND completed form and UNCW Key Request

Form to the **Locksmith Shop** via Email to
PhysicalPlantLocksmithShop@uncw.edu

Name & Extension of Person filling out form
(in case of questions):

CRT # _____

Work Order # _____

*CRT & WO# assigned by Work Control Administration
upon receipt of this form (from Locksmith Shop).*

Name of Recipient: _____

Email of Key Recipient: _____

Phone # of Key Recipient: _____

Sponsor (Must be Dean, Department Head, or above): _____

Email: _____

Phone #: _____

Sponsor Department: _____

Business Need for Key: _____

One Card #: _____

Sponsor Signature: _____

By signing this form I, the Sponsor, agree to take full responsibility for the keys given to this individual. I will let the Physical Plant know as soon as the individual is no longer working at UNCW and will immediately turn the keys to the UNCW Lockshop. If the keys are lost or not turned in when the individual leaves UNCW, my department will take financial responsibility for the cost of rekeying the affected buildings.