

**LSU Libraries  
Key Request Form**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Key Requested:** \_\_\_\_\_

**Reason the key is needed:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature of Department Head:** \_\_\_\_\_

**Signature of Associate or Assistant Dean:** \_\_\_\_\_

**Signature of person issuing the key:** \_\_\_\_\_

**Signature of person receiving the key:** \_\_\_\_\_