KEY AUTHORIZATION FORM FOR FRENCH FAMILY SCIENCE <u>CENTER</u>

Name ______

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The following section should be completed by your research director or person supervising your employment.

Please issue the following key(s)/card access to _____

_____ Lab - Room #_____

_____ Instrument Rooms (key to 2117 and 2323, and card access to 1240/1241)

_____ Other (specify room numbers: ______)

Date

Signature of Research Director OR Employment Supervisor

(revised 05/07/10)