

**SWAIN COUNTY SCHOOLS
REQUEST FOR FOB AND/OR SECURITY CODE**

*Employee Instructions: Complete section 1
and turn in to your school secretary.*

SECTION 1

Employee Name Employee's Primary Location

Requesting access to school/s: Door Location

Will a security code for after hours be needed? Yes No

Reason access requested: Lost / Stolen / New Access (circle one) Explain

**I AGREE THAT I WILL BE PERSONALLY RESPONSIBLE FOR A \$5 REPLACEMENT CHARGE IF THE KEY IS LOST OR NOT RETURNED.
I ACKNOWLEDGE THAT THIS FOB/KEY HAS BEEN ASSIGNED TO ME AND THAT I AM RESPONSIBLE FOR IT'S USE. I WILL NOT LOAN THIS KEY TO ANY OTHER
PERSON.**

Employee Signature Date

SECTION 2

To be completed by Principal/Supervisor

Access Approved Access Denied Building Security Code Needed Approved Denied

Comments

Principal/Supervisor Signature Date

SECTION 3

To be completed by Athletic Director if Applicable

Access Approved Access Denied

Athletic Director Signature Date

SECTION 4

To be completed by Safe Schools Coordinator

Access Approved Access Denied

Safe Schools Coordinator Signature Date

FACILITIES DEPARTMENT

***FOBS ARE ISSUED BY THE FACILITIES DEPARTMENT AND ARE TO BE COLLECTED BY THE PRINCIPAL OR SUPERVISOR AND RETURNED
TO HUMAN RESOURCE DEPARTMENT AT THE TIME OF SEPARATION OR TRANSFER DATE.***

FOB# Date FOB Issued Facilities Representative Signature

Date FOB Returned Principal/Supervisor Signature