



Please return completed form to the Hospitality Hub:
Email: SRC@baylor.edu
Fax: 254-710-1753

REPORT OF LOST KEYS

Date: _____

Name: _____
Please Print Clearly

Email: _____

BAYLOR ID Number: _____

Faculty Staff Student

Department Account Number: _____

Office Phone Number: _____

Key ID Number: _____

Building: _____ Room Number: _____

Action Taken: _____

Recommendation: _____

Justification: _____

Print Name: _____
Department Head Date

Signature: _____

Signature: _____
Locksmith, Baylor Facility Services Date

Signature: _____
Don Bagby Date
Director of Facilities Management