

Building: _____

Key Issuance Designee: _____

CANON CITY SCHOOL DISTRICT KEY CONTROL ACCOUNTABILITY

The purpose of this procedure is to establish reasonable accountability and personal security for the staff and students of Canon City Schools and to ensure the protection of personal and district property.

1. ISSUANCE OF KEYS

- a) In each building, an authorized designee approved by administration will be responsible for the issuance and control of all keys/FOBs for their buildings. The authorized designee will maintain an updated log that documents each employee name and key/FOB number(s) that have been issued. The Operations Department will request a copy of the log annually.
- b) The designee will check in each employee at the beginning of each school year and check out each at the end of each school year. This procedure will be documented at the building level.
- c) Only Building Principals can approve the issuance of a Building Master Key and only the Director of Support Services or Operations can approve the issuance of a Grand Master key at the request of a principal.

2. RULES REGARDING THE ISSUANCE OF KEYS AND/OR FOB'S

Keys/FOBS will be issued to school district employees only. The Director of Support Services must approve any exceptions. Employees who receive keys/FOBs agree:

- To sign and date this accountability form to indicate agreement of the rules of this agreement.
- To check in and check out with building's authorized designee at the start and end of each school year.
- To not duplicate any key. The unauthorized duplication of keys adversely affects District security. A violation of this rule is considered serious and will be grounds for disciplinary action.
- To not lend keys/FOB'S to anyone. Including but not limited to: students, staff, volunteers, parents.
- To keep keys/FOB's in their possession at all times. Do not leave key(s) unattended at any time.
- Keep keys separate from any item that may identify the building/ person the key(s) belongs to (eg. ID Badge)
- To pay replacement fees for any lost or stolen keys as indicated in section 3.
- To report a lost key or FOB immediately to building administration.

3. LOST OR STOLEN KEYS

- a) Lost or stolen keys/FOB's must be immediately reported to the Director of Support Services (719-276-5715). An incident report will be completed by the Director of Support Services and will be forwarded to the Director of Operations, and Building Administrator.
- b) The Director of Support Services will submit a work order for the replacement of any lost or stolen keys/FOB's. No keys/FOB's will be replaced without a work order.
- c) The cost for replacement key(s) will be as follows and will be paid by the employee:
Operator Keys - \$14.00
Master Key - \$16.00
- d) There is not cost for replacement FOB's.

4. RETIREMENT, RESIGNATION, SEPARATION FROM CANON CITY SCHOOLS

- a) Canon City Schools requires that all keys/FOB's are returned to the building administrator and/or authorized designee upon retirement, resignation, termination, or separation from the District.
- b) The Faculty/Staff member's separation will not be complete until the keys/FOB's assigned have been returned and written documentation is generated by the building authorized designee.

5. REPAIR OF LOCKS, KEYS AND DOOR HARDWARE

- a) A work order must be submitted for all repairs or requests to any District locking device, key or door hardware and will be controlled by the Director Operations. If the repair is due to a lost or stolen key, the buildings budget may be charged for the repairs.

6. KEY ISSUANCE TO OUTSIDE CONTRACTORS

- a) Repairs of campus facilities which require a contractor to be issued a key or FOB must be approved by the Director of Operations (719-276-5812). The contractor will be issued and return the key per this agreement. Funds will be deducted from contractor fees if the key is lost/stolen.

I, _____ (Print Name), have received the key(s)/FOB(s) listed below and acknowledge that I have read, understand and agree to this Key Control Accountability form.

KEY NUMBER	FOB NUMBER (First 5 digits on FOB)	ROOM NUMBER	BUILDING NAME	CHECK-OUT DATE	CHECK-IN DATE

KEY ISSUER:

EMPLOYEE:

Print/Signature/Date

Signature/Date

Upon resignation, retirement or dismissal, all of the following applicable items must be collected by the building/department administrator.

RETURN DATE	ID BADGE	KEY(S)	FOB(S)	RADIO	CELL PHONE	LAPTOP/CHROME BOOK	OTHER	COMMENTS

All of the applicable items indicated with employee initials above have been collected and secured by the building/dept. administrator. Indicated N/A for non-applicable items.

KEY ISSUER:

EMPLOYEE:

Print/Signature/Date

Print/Signature/Date

This form is kept on permanent file at each building and available upon request of Support Services or Operations.