

School Key Policy

The primary focus of the teachers and administrators is to prepare students for tomorrow. The establishment of a safe environment in which the students can reach this goal is the shared responsibility of the School administrators and its teachers. Teachers and administrators receive keys to the School. These recipients are entrusted with keys to the School to carry out the education objectives of the School. Because possession of a school key gives authorized persons unfettered access to the School grounds, to the students, and to sensitive records, all parties in possession of a key must keep the goals of confidentiality and safety in mind at all times. In furtherance of these goals, the following School Key Policy which must be followed by anyone who is an authorized key holder:

- Only authorized persons are allowed to be in possession of a key to the School. Authorized persons are only those persons with documentation of authority to possess or control a key. Authorization is specific to each key issued.
- No person may give his or her key to an unauthorized user for **any** period of time. Any key(s) found to be in the possession of an unauthorized person will be confiscated and any person found to have provided a key or a copy of a key to an unauthorized user may be disciplined up to and including termination.
- Unauthorized duplication of a key is strictly prohibited. No person may duplicate a key or request the duplication of a key without express, written permission.
- Lost or stolen keys must be reported to the School leader immediately. A lost key may require one or more buildings to be rekeyed. This process may cost a substantial amount of money. Where permitted by applicable laws, the School may withhold the cost of rekeying the building(s) from a teacher's or administrator's check or final paycheck if a violation of this policy resulted in the lost or stolen key.
- Key holders agree to refrain from compromising the security of the campus or a building. Key holders are required to report to the School leader any doors that are unsecured or in violation of the School's policies.
- Employees must return to the School leader immediately upon request all keys assigned to them or that are in their possession or control in the event of termination of employment, resignation, or layoff.
- Violation of these requirements may result in the loss of key privileges and may result in discipline up to and including termination.

By signing this form, I, _____, agree that I have read and that I understand the entire Key Policy. I further agree to the terms and conditions set forth in this policy.

I acknowledge that I received the following key(s):

Key Number(s): _____.

I agree to abide by the Key Policy with regard to this key and all School keys in my possession.

Printed Name: _____

Signature: _____

Date: _____

School: _____

School Key Responsibility Form

I acknowledge that I have received the key(s) listed below. I understand that it is my complete responsibility to keep this key in a safe place that will not allow access by students, unauthorized staff or any individual not directly associated with the school. I also understand that under no circumstances am I to duplicate this key.

I am aware that if I lose this key, it is my responsibility to immediately report to the Principal or Operations Manager that the key has been lost and to report the last location and time when I had it in my possession. I also understand that I may be charged for a replacement key.

I understand that once my employment ends with the school, it is my responsibility to return this key immediately and that until I do so, the school may withhold my paycheck. I understand that failure to return the key may result in significant penalties.

Please list each key that was issued below in terms of the doors that it will open. (e.g., Master, Exterior Doors, Gymnasium, Cafeteria, Etc.)

Key 1 _____

Key 2 _____

Key 3 _____

Staff Name (Print): _____

Date Issued: _____ **Staff Signature:** _____ **SOM Initials:** _____

Date Returned: _____ **Staff Signature:** _____ **SOM Initials:** _____