

RECEIPT FORM
FOR BUILDING KEYS/CARD KEYS/LOCKS

Location: CIRCLE ONE BELOW

Harrison High School, 401 Kingsland Avenue

Washington Middle School, 1 North 5th Street

Hamilton Intermediate School, 223 Hamilton Street

Lincoln Elementary School, 221 Cross Street

Kennedy Elementary School, 1 Washington Street

_____ (fill-in other)

Date: _____

Print Name: _____

Your Current Room #/Area _____

Describe Request with Specificity: _____

I HEARBY ACKNOWLEDGE RECEIPT OF – **THE ABOVE**

I UNDERSTAND THESE KEY(S) ARE PROPERTY OF THE HARRISON BOARD OF EDUCATION AND WILL BE IMMEDIATELY RETURNED TO THE PRINCIPAL UPON MY END OF SERVICE WITH THE DISTRICT. THESE KEYS SHALL ALSO BE IMMEDIATELY RETURNED UPON REQUEST OF THE PRINCIPAL, SCHOOL BUSINESS ADMINISTRATOR OR SUPERINTENDENT.

Date: _____

Signature

=====TO BE RETURNED AFTER SIGNATURE TO THE BOARD OFFICE=====