

KEY/CODE APPLICATION

Today's Date: _____

Name: _____ Phone: _____

- Staff Ministry Director Staff assistant (see section below) Ministry assistant (see section below)
 Temp (see section below)

Assistant to (if applicable): _____
Please give brief description of work to be done: _____
Staff/Director signature: _____

Room(s) needing to be accessed: _____

Date(s) needing access: Ongoing Various dates/times Specific date(s): _____

Time of work/event: From: _____ To: _____ Set-up Time: _____

OFFICIAL CHURCH USE ONLY

Request: Approved Denied

Comments: _____

Approved by: _____ Date _____
Signature