

**CUBA INDEPENDENT SCHOOL DISTRICT  
KEY CHECKOUT/RETURN FORM  
SCHOOL YEAR: \_\_\_\_\_**

EMPLOYEE NAME: \_\_\_\_\_

DEPARTMENT SITE: \_\_\_\_\_

<u>KEYS/LOCATION</u>	<u>KEY # – IF AVAILABLE</u>	<u>DATE CHECKED OUT</u>	<u>INT.</u>	<u>CHECK-IN</u>	<u>INT.</u>
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____	_____

**\*\*THERE WILL BE A \$10.00 FEE FOR EACH LOST KEY**

EMPLOYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_