

FOB # _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Upon receipt of the fob, the student agrees to the following

_____ By accepting this fob, I acknowledge my responsibility for all property secured by the lock operated by this fob.

_____ I understand this fob is the property of CSU and must be surrendered upon request.

_____ I will not transfer this fob to any other person.

_____ I acknowledge that no key will be issued without photo identification.

_____ I will surrender this fob to Veterans Services Office whenever I end my enrollment with Charleston Southern whether it be by graduation or withdrawal.

_____ I understand that there could be a fee charged to my Student Account should be lost or stolen or if I do not surrender this fob upon the ending of my enrollment with Charleston Southern University.

_____ I understand that a hold will be placed on my account upon the school's notification that I am no longer enrolled if this fob is not surrendered to the Veterans Services Office.

_____ I understand the fob is not to be wrongfully used, tampered with, or duplicated.

_____ I understand that I must notify Veterans Services immediately if a fob is lost or stolen so that action can be taken to secure the space in which access is given.

I have read and understand and agree to be bound by the terms and conditions as stated above:

Signature: _____

Date: _____