



Employee ID Badge Request (Non-Credentialed)

All Novant ID badges must be picked up @ either your local Public Safety department or from your direct manager/director or proxy.
Please make sure to bring a Photo ID with you when picking up your ID badge.

TYPE OF BADGE REQUEST:		Date: _____
<input type="checkbox"/> New Badge or <input type="checkbox"/> Replacement Badge * (please disable old badge ID)		<input type="checkbox"/> Hemby Logo
----- (\$15.00 replacement fee) <input type="checkbox"/> Damaged/Broken <input type="checkbox"/> Lost <input type="checkbox"/> Forgot Badge		Auth: _____
----- <input type="checkbox"/> Surname Change <input type="checkbox"/> New Credentials <input type="checkbox"/> Rehire <input type="checkbox"/> Transfer <input type="checkbox"/> Normal Wear/Tear		
----- <input type="checkbox"/> FT Employee <input type="checkbox"/> PT Employee		
----- <input type="checkbox"/> Student <input type="checkbox"/> Contractor/Vendor <input type="checkbox"/> Clergy <input type="checkbox"/> Volunteer		Exp. Date: _____
Contractor/Vendor Information (if applicable):		
Corp ID: _____		Contract #: _____

EMPLOYEE INFORMATION:	
Employee Full Name: _____	Preferred Name: _____
Employee #: _____	Department Name : _____
	Dept #: _____
Facility/Location: _____	
Credential #1: _____	Credential #2: _____ (for verification purposes only)*
<p>By signing below, I verify that all information noted for badge request is correct and accurate. I understand that any falsification of information or misuse of my ID badge for identification purposes or to gain access for reasons other than to fulfill my job duties may lead to disciplinary action up to termination.</p> <p>* I also understand that Public Safety cannot make any changes to credentials, names, employee #'s in the PeopleSoft system and this data must be updated by the employee's direct report or HR.</p> <p>If this is a replacement ID badge, I understand that I maybe charged \$15.00 depending on the purpose for the ID replacement. All payments can be made to the hospital cashier's office and I will bring a receipt of payment prior to receiving my new badge ID.</p>	
Employee Signature: _____	Date: _____

AUTHORIZATION:	
Department Manager/Supervisor (Please Print): _____	
Signature Department Manager/Supervisor: _____	Date: _____
Public Safety Representative: (Please Print): _____	