



# Employee Badge Request Form

## Employee Information

Employee Name: \_\_\_\_\_  
(Last) (First) (M.I.)

Company: \_\_\_\_\_ Cost Center: \_\_\_\_\_

Office Building: \_\_\_\_\_ Position: \_\_\_\_\_

Extension: \_\_\_\_\_ Emergency Contact & Number: \_\_\_\_\_  
(optional)

Immediate Supervisor: \_\_\_\_\_ Ext: \_\_\_\_\_

**Classification:**  
(Please Check One)

Employee: \_\_\_\_\_ Consultant: \_\_\_\_\_ Outside Contractor: \_\_\_\_\_ Vendor: \_\_\_\_\_  
(Permanently Assigned to Location) (Services Campus)

**Reissue Only:**

Reason for Reissue: \_\_\_\_\_

Current ID Card #: \_\_\_\_\_ Original Building Access and Time Zone: \_\_\_\_\_

Requested Building and Time Zone: \_\_\_\_\_  
(24/7 and Weekend Access Requires Manager Approval)

New ID Card #: \_\_\_\_\_

By taking possession of a badge, I am being held liable for the return of this badge. This badge MUST be returned upon termination of employment (unless other arrangements have been made with VOLVO personnel and the Security Manager). I will be the only person to use my badge, and I will wear it were it can be readily seen by others while at work. Also by taking possession of this badge, all parking rules and regulations now apply to me. If I do not return the badge, or turn it over to my manager I will be charged \$25.00 dollars for badge replacement.

**I have read and understand the above statement:**

\_\_\_\_\_  
(Employee Signature) (Date)

\_\_\_\_\_  
(Manager Signature ONLY if first time issue) (Date)

**Completed By:** \_\_\_\_\_  
(Volvo Employee) (Print Name) (Signature) (Date)

**Security Officer:** \_\_\_\_\_  
(Securitas) (Print Name) (Signature) (Date)

Access(es) Granted: \_\_\_\_\_ Badge #: \_\_\_\_\_

Time Zone(s) Granted: \_\_\_\_\_