

New Photo ID Badge Request Form

Complete the information to receive a Mercy Iowa City ID badge. The badge provides access to parking lots and doors, payroll deduction, and time clocks. The information below must be completely filled out before issuing a new badge. Please print clearly.

Employee #: _____

First Name: _____ M.I.: _____ Last Name: _____

Department: _____ Job Title: _____

Credentials (**limited to 10 characters**): _____

NOTE: Credentials are only allowed on badges for employees providing direct patient care. Credentials displayed may be only those required for your job as stated on your job description.

Primary Shift: 1st 2nd 3rd

Vehicle Information (must be completed) One permit will be issued for each vehicle
 Check here if needing a new permit

Vehicle #1	Vehicle #2
Plate #:	Plate #:
Make:	Make:
Model:	Model:
Year:	Year:
Color:	Color:

I understand that by signing below, I agree to follow Mercy Iowa City's identification policy (A-17). Violations of the identification policy or abuse will result in a mandatory replacement of the badge at cost to the employee (\$25)

Signature _____ Date _____

For Security Department Use:

Parking Permit Number #:	Parking Permit Number #:
Permit Color (circle)	Permit Color (circle)
Royal Blue	Royal Blue
Green	Green
Red	Red