

CITY OF NEWPORT NEWS



Security Services Division

ID BADGE REQUEST AND MODIFICATION FORM

Initial Issue (New Employee)] Ini	tial Issue	(Rehire)		Replacement	(Lost/Dai	maged/Modify)
Employee Information: ID Badges are the property of the City of New representative. ID badges are individual and n your ID badge. Lost ID badges must be report signing this request form below you agree to a Badges. Badging hours are Monday – Toutside of our badging hours.	nay not be ed immed bide by al	e used by anyoniately to the Stately to the Stately to the Stately Department	one other than Security Servion Security Servion	the employed ces office by vision policion	ee to whom they are remailing idbadgeores and procedures re	assigned. In the state of the s	Oo not let anyone else borrow gov or calling 926-8195. By use and issuance of City ID
Last Name	st Name First		rst Name M				Suffix
Agency/Department Divi		vision/Office W		Wo	ork Location		Office Phone
Title/Position	Emp	nployee ID No.			y Email Address		Date of Hire
Supervisor Name Su		rvisor Title		Sup	Supervisor Email Address		Supervisor Phone
Employment Status							
☐ City Employee: ☐ Full Time ☐ Part Time ☐ Intern							
□ Contractor □ Regular □ Temp □ Other							
Reason for Replacement of Badge (If Applicable)							
Employee Signature Date							
Access Authorization: Access must be approved by the employee's department director, division administrator, superintendent, or an approved designee.							
Facilities/Location Groups	Doors/Rooms/Access Levels			Hours/Special Requests			
Authorized Approver Dir/Adm/Sup Name:	Signature			Date			
Security Services Use Only							
Issued by	Signature				Date		Badge System ID