

## ID BADGE / ACCESS CARD FORM Contractors

CONTRACTOR INFORMATION			
<b>Name.</b> <i>Print your full name as it is listed on your Social Security Card.</i>	First Name	M.I.	Last Name
<b>Social Security Number.</b> <i>Enter your Social Security Number. Note: This number will not appear on your ID badge.</i>			
<b>Company Name, Address, Contact Person, &amp; Phone:</b> <i>Enter your company's name and address, as well as your contact person and phone number. The contact person will be notified when badges are ready to be picked up.</i>			
PERSONAL DATA			
Date of Birth	Race	Sex	
PROJECT DATA and APPROVALS			
MCG Project Name	Project Start Date		
MCG Project Manager	Project End Date		
MCG Project Areas for which contractor requires access:	Project Manager Approval Signature:		
	Date:	MCG Ext:	
ACKNOWLEDGEMENTS / SIGNATURE			
<p>I understand this card is the property of the Medical College of Georgia and must be returned upon my termination, at the conclusion of this project, or if requested by MCG officials. Possession and use of this card constitutes acceptance of the terms and conditions of MCG's policies governing its use. <b>I understand that if this card is lost or stolen, I must immediately notify Public Safety at 1-2911. I will be required to pay \$10 for a replacement card.</b></p> <p>I understand that if other MCG services are to be accessed, it is my responsibility to get the card activated and/or terminate my participation in these services.</p> <p>I hereby authorize the Medical College of Georgia and/or Medical College of Georgia Health, Inc. to receive any criminal history record information pertaining to me which may be in the files of any federal, state or local criminal justice agency.</p>			
_____ Signature		_____ Date	
<b>PSD Use Only:</b> Badge Number: _____			
<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;">* If CHRI is checked YES, see attached.</div>			
<b>Badge Type:</b> <input type="checkbox"/> Paper <input type="checkbox"/> No Stripe <input type="checkbox"/> Stripe			
<b>CHRI:</b> <input type="checkbox"/> YES* <input type="checkbox"/> NO    Initials: _____			