

INFORMATION FORM FOR CONTRACTOR REQUESTS

To better assist you with your need, please answer the questions below. Your input will help determine what clearance steps are required to obtain a Augusta University Medical Center badge. In addition to the request form and to provide a jump start for clearance, please have each person requesting a badge complete the Criminal Background Authorization form. Each contractor may be charged a minimum of \$150 for a Criminal History Check and Occupational Health services. After completing each of the forms, please fax to Lacey Stephens at 706-721-1126 (be sure to use a cover sheet).

Clearance steps will vary from client to client. Based on the following factors:

- Type of client and patient contact.
- Services provided and duration of the stay of the client.
- Location of the services being provided and Time the services will be provided.
- Steps may include, background check, Occupational Health, fingerprints, and / or references.

Augusta University Medical Center Employee Requestor (overseer of contractor) and Unit. Office and cell phone number.	
Cost Center to charge background and occupational health appointment too.	
Type of services being provided. Provide description of work being done.	
Location of services. Time of services: AM or PM. Duration of services being provided (start date and end date).	
Names of contractor personnel that need to be cleared and their SSN, DOB, address and individual contact information. Indicate their employer and supervisor contact information. This is needed to schedule an Occupational Health appointment.	
Will the contractor have patient contact? Will the contractor be in the same room as the patient?	
Credentialing purposes: What makes the client qualified? For an internship student, describe the academic program he/she is enrolled in and graduation date. The department will need to maintain print outs of primary source verifications and provide Human Resources a print out as well. Primary source refers to the electronic online validation.	
VP APPROVAL: Please have VP of department sign to confirm funds are available for this request; or you may attach an email confirmation to this request.	