**Washoe County Community Services Department**

***ID Badge Request Form***

*Please return to the Community Services Department ID Badge Request group at* *IDBadges@washoecounty.us*

Date:

Department:

HR Representative: Phone #:

***Photo ID Badge Replacement:***

*Name of Employee Reason for Replacement*

 *Access Needed:*

 *Set Up Like:*

 *(Name of fellow employee with same access)*

***Short Term (Non-Photo) ID Badges:***

***Temporary:***

 *Number of Badges needed: Number range:*

*(Ex: department already has temporary badges 1 – 10, you now need badges 11-20)*

 *Access Needed:*

***Contractor****:*

 *Number of Badges needed: Number range:*

 *Access Needed:*

***Visitor:***

 *Number of Badges needed: Number range:*

 *Access Needed:*

***Volunteer:***

 *Number of Badges needed: Number range:*

 *Access Needed:*