New	Photo		
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Issued By:

Key Card #:

TRI-CENTRAL SERVICE AREA SECURITY SUPPORT SERVICES Identification Badge & Vehicle Registration

Transfer Yes No Re-Hire: Yes No Department Administrator/DA (Please Print) DA's Ext. Status (ie: Staff, Associate, Per-Diem, etc.) School: EHICLE (S) INFORMATION Year Make Model Color License Plate o you require a parking stall or space designated No Andrew Administration of Stabled veterans? Are any of the vehicles listed above tailler than 6' 10"? Yes No Andrew Yes, in the spaces provided list the individual key number stamped to ach key in your possession (ex. 1AMD4, 408G27, 10RT16, etc) or Dept. Manager or Supervisor use only: Bilingual Required Position Language ept. Manager Signature: Date hear by acknowledge that I have read and understood the Kaiser Permanente (KP) ID Badge and Parking policies. I must comply with Title 22 regulations, which state: All employees of the hospital having patient contact, include students, interns and residents, shall wear an identification tag bearing their name and vocational classification tag bearing their name and vocational classification to be worn on the firon upper half of the body with the name clearly visible. I also understand that this card is Medical Center property and must be turned in to personnel office upon termination of employment or upon request of management. I must comply with the Parking Policy, by parking in the appropriate designated area and by updating vehicle information necessary. I also must turn in my parking hang-tag upon termination of employment and or at the request of Security, Hur Resources and or KP Administrative staff. I understand that Kaiser Permanente does not assume responsibility for lost, stolen or damaged vehicles or personal property lef parking areas.	Are any of the vehicles listed above taller than 6' 10"? Yes Individual key number stamped Pept. Manager or Supervisor use only: Bilingual Required Position Language Langua	Fir	st Name			Last Name			Mic	ddle Name		Empl	oyee #
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Status (ie: Staff, Associate, Per-Diem, etc.) School: EHICLE (S) INFORMATION Year	Status (ie: Staff, Associate, Per-Diem, etc.) School: Child Color Colo	New Hire:	Yes	No	o V	Re-Hire:		Yes		No 🔽			
Performance Performance	Part Make Model Color License Plate		Departm	ent A	Administra	ntor/DA (Please Print)				D.	A's Ex	t.	
Performance Performance	Per Make Model Color License Plate												
Make Model Color License Plate	No you require a parking stall or space designated for disabled persons or disabled veterans? No Are any of the vehicles listed above taller than 6° 10"? Yes for disabled persons or disabled veterans? No Are any of the vehicles listed above taller than 6° 10"? Yes for disabled persons or disabled veterans? No Yes, in the spaces provided list the individual key number stamped Provided list in the spaces provided list in successful key in your possession (ex. 1 AMD4, 40BG27, 10RT16, etc) Provided list in the individual key number stamped Provided list in the	Status (ie: St	aff, Associ	iate, Po	er-Diem, etc.	.)			School:				
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Signature: Date			15.							ъ.			
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Replacement

Parking Permit #:

Date Issued: Temporary

ID Badge #: