

## UCLA PHOTO ID APPLICATION FORM INSTRUCTIONS

### **I. BADGE TYPE**

Please select the type of badge. (Employee's primary work unit)

### **II. PURPOSE**

Please select the purpose for the employee – i.e. New Employee, Re-Hire, etc. Please ensure that any selection that indicates a monetary value (Damaged/Stolen) requires the employee to show proof of payment from the Cashier's Office, along with the ID application.

### **III. APPLICANT INFORMATION**

Please use the employee's **LEGAL** name, (same as driver's license or passport). No nicknames will be used on the photo ID's, and fill out the other fields as they apply.

ID#: UC Employees or students ID number. Affiliates leave blank.

Title: Official job classification

Dept: Name of Department as specified on the **Signature Authorization Form.**

Professional License/Degree: Healthcare workers only.

**Faculty, Staff, Student, Affiliate:**

Affiliate end date: This cannot be greater than one year and will end at termination of contract of service.

### **IV. DESIGNATION**

Please indicate the color that will be used around the staff member's photo.

RED – Administrator, Department Head, Physician, Professor

BLUE – Nurse, Student, Rotating Shift Employee – Evening/Nights and/or weekends

YELLOW – Day shift Employee – No Weekends

### **V. PROX ACCESS CARD**

Please indicate if "prox access" to RRUCLA, RNPH, and/or Santa Monica is required. If no prox access is required, please check the box that says "**NO** proximity access required."

### **VI. CHS ACCESS**

If access to CHS is required outside of normal business hours and/or on weekends, please provide justification. This is only for non School of Medicine employees or students.

**VII. APPROVED BY:**

This area is to be signed by the **AUTHORIZED SIGNER ONLY**. The authorized signer is the person who filled out the **AUTHORIZED SIGNATURE FORM** – applications signed by personnel not listed in our database will not be accepted.

**VIII. APPLICANT AGREEMENT AND COMPLIANCE – REQUIRED**

By signing the photo ID form all applicants agree to the Bruin Card Terms and Conditions as well as the information listed on the form.  
ID number = UC ID for students or employees  
Name – LEGAL name (no nicknames)

**IX. AFFILIATES ONLY – SUPPLEMENTAL INFORMATION**

This information applies only to UCLA affiliates.

Address: current residence/telephone,  
Date of Birth,  
Sex (check Male/Female)