

PHOTO ID BADGE/ACCESS CARD REQUEST

USE FOR: New Non-AHS Employee ID Badges
Cancellations
Lost or Stolen Photo ID Badges/Access Cards
Changes to Existing Photo ID Badges/Access Cards

- Access Card and Med Room Access must be authorized by Manager or Designate
- Completed and signed requests will be required when submitting, send to the ID Office via email to grandeprairie.cardaccessphoto@ahs.ca
- \$15.00 non-refundable fee is required for all lost or stolen replacement cards, to be paid in full to Alberta Health Services prior to card(s) being issued (cash, cheque or money order accepted). Please email grandeprairie.cardaccessphoto@ahs.ca to clarify process. Please do not mail cash.

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	WHAT DO YOU NEED?					
•	 □ NON AHS PHOTO ID BADGE (EG: STUDENT, DOCTOR, VOLUNTEER) □ ACCESS CARD □ CHANGES TO EXISTING PHOTO ID BADGE /ACCESS CARD 					
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ste	WHY DO YOU NEED IT?					
ane	·			V EMPLOYEE		
Re				NGE (EG: LAST NAME CHANGE, TITLE CHANGE)		
β	WHY DO YOU NEED IT? LOST/STOLEN CANCELLATION/TERMINATION CHANGE (EG: LAST NAME CHANGE, TITLE) FIRST NAME: CHANGE FIRST NAME TO: CHANGE LAST NAME TO:					
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ple	LAST NAME:	CII	CHANGE LAST NAME TO:			
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	E-people #: (Required for AHS Staff only)			POSITION/TITLE:		
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	DEPARTMENT:			EMPLOYEE SIGNATURE:		
	WHAT ACCESS DO YOU REQUIRE FOR YOUR EMPLOYEE?					
ger	OR SAME ACCESS AS EMPLOYEE: NAME OF MANAGER OR DESIGNATE: TITLE:					
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etec	NAME OF MANAGER OR DESIGNATE:					
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	GITS TO DE DELIVISOES TO					
	□ 24 HOUR MED ROOM ACCESS REQUIRED SITE TO BE DELIVERED TO:					
	SIGNATURE:					
	SIGIO (TORE.					
	Office Hee Out					
	Office Use Only DATE: CLERK: PHOTO ID ONLY: EXISITING CARD# NEW CARD					
	DATE. CLERK. PROTOTO			OINLT.	LAISITING CARD#	NEW CARD #
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