

Crawford County Id Badge Card Receipt

I have received my Employee (photo) Identification card this _____ day of _____, 20____.

I understand that I am responsible for the safekeeping of this card. I agree to use it only in my official capacity as an employee of Crawford County. I further understand that upon my separation from the agency, or upon issuance of a new card. I must return this card to the Elected Official or Department Head in charge.

Badge Requirements:

- Badge shall be worn at all times while working in Courthouse or Administration Building.
- Badge shall be worn above waist and picture visible at all times.
- Lost badges shall be reported to Elected Official or Department Head immediately.
- If badge is misplaced or forgotten a visitor badge shall be issued to employee each day they come to work.
- Improper use of County Badge shall result in Disciplinary Action up to and including termination.

Employee's Signature

Printed Name

Date