

## BADGE/ID REQUEST FORM

Campus Center Operations 262.524.7367

Today's Date:

Office/Staff:

Date Needed:

Group:

### Badge Request Guidelines

- Please discuss **new** badge design with the Campus Center Assistant Director at least 10 business days before the badges are needed. E-mail: [shorning@carrollu.edu](mailto:shorning@carrollu.edu)
- Please complete form and submit to the Card Office.
- Badge holders are available on a limited basis. Please give two weeks advance notice.

Badge / Holder	Price each	Quantity	Total
New Design			
Plain card stock			
Magnetic stripe card stock			
Magnetic holder			
Pocket clip			
<b>Total</b>			\$ _____

Please complete the information listed below then return the form to Campus Center Operations.

CHARGE Department: \_\_\_\_\_ Cost Center: \_\_\_\_\_ Account: \_\_\_\_\_ Project: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

CREDIT: Campus Center 8045 5580 8999