

## **MASSACHUSETTS TRIAL COURT NEW EMPLOYEE IDENTIFICATION CARD REQUEST FORM**

Incomplete forms will not be approved:

ID Access Cards can be requested for employees by submitting this form to the Chief Court Officer (CCO) / Assistant Chief Court Officer (ACCO) of the court location. Upon receipt and review, the CCO or ACCO will submit this request to the Regional Security Department office for review before final submission to Security Operations.

All requests for NEW badges must be made by an Employee's supervisor or manager. The supervisor must collect and return all ID badges to the CCO/ACCO upon resignation/termination of an employee.

The issuance of IDs and Access to Massachusetts Trial Court locations is up to the discretion of the Security Department per the ID policy. Individuals must meet the requirements as specified in the Trial Court ID Policy dated 2/2017, as revised. Contractors, volunteers, interns, and individuals not listed under the employee payroll of the Commonwealth of Massachusetts DO NOT qualify to receive a MA Trial Court ID Card.

PART I: Supervisor of Department / Agency Informat	ion
Court Division / Agency:	Court Location:
Requesting Supervisor Name:	Title:
Supervisor Telephone:	Supervisor Email:
Signature of Supervisor authorizing the New Employee ID an	d access:
PART II: New Employee Information	
Employee Name: (First, MI, Last)	Court Division:
Employee Title:	
Employee Phone: Emp	loyee Email:
Date of Hire: Employee: D	Trial Court  State  County  Other
PART III:       Access for New Employee         Court Name & Address Employee will be located:	<ul> <li>The Employee will work full-time in a court building</li> <li>The Employee is assigned office space</li> <li>Position funded by department for 1 yr. or more?</li> </ul>
If hours of access are <b>not</b> M-F, 8:30 am to 4:30 pm, please specify <b>assigned</b> duty hours:	Does the Employee <b>have office space</b> in more than one location? $\Box$ No $\Box$ Yes,
Start: am/pm - End: am/pm Reason:	If yes, please list other office location (will be verified by CCO/ACCO of requested location) :
	l access updates (lost ID, terminations, transfers) must be reported to the
Signature of Employee:	
For Security Department use: Card ID No:	Date Issued:
(rev. 02/2017)	SD Form 1100