

COUNCILLOR I.D BADGE REQUEST FORM



Please note that when presenting yourself for I.D. badge photograph you will require to have with you a copy of this form duly completed and proof of identity.

It is your responsibility to take steps to update information in the event of any changes (including any significant change in appearance).

*Delete as applicable.

All I.D. badges will be issued from the **I.D. Service, Business Hub 10, 2nd Floor South, Marischal College, Broad Street, Aberdeen AB10 1AB**
Telephone: **01224 522232**

This form should be fully completed and sent to the I.D. Service, Marischal College at least **5 days** before attending for the photo session, which are by **appointment only**:

Wednesdays and Fridays

**9.15 - 12.30
14.15 - 16.30**

The information collected on this form is recorded manually and on computer, stored securely and processed. Aberdeen City Council will process your information fairly and lawfully and in accordance with the principles of the Data Protection Act 1998.

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COUNCILLOR DETAILS

SECTION A - For completion by the Councillor:

Full name _____
(e.g. William Smith)

Name to be shown on front of badge _____
(e.g. Bill Smith, B. Smith or Bill Smith MBE)

Designation
COUNCILLOR

Telephone Number _____
(Your home telephone no.)

E-Mail address _____
(Your council e-mail address)

Intranet Authorisation

I understand that information contained on this form together with my photograph will be retained on record for administration and identification purposes. This information will not usually be disclosed to anyone outside the Council unless with my consent.

I do/do not* consent to my photograph being displayed along with my directory details on the Council's intranet.

Reason for Issue
(Please tick as appropriate)

New Councillor _____

Change of Details _____
(Give reasons)

Replacement Card _____
(Give reasons: lost, stolen)

Councillor's Signature : _____ **Date:** _____

Section A **MUST** be completed and signed by the Councillor applying for the badge.

SECTION B - For completion by Members Support:

I confirm that the above details are correct and the above Councillor should to be issued with an I.D. badge. The intranet disclosure has also been completed.

Signed: _____ Date: _____

Designation: _____ Telephone No. _____

Financial Code: _____

Section B **MUST** be completed and signed by the authorising officer within Members Support.

For I.D. use only

Date received: _____ Date card issued: _____

Date entry deleted : _____ By: _____