

## RUconnection ID Card Request Form

To apply for a card, individuals should complete this application and have it signed by their **sponsoring department chair, center director or dean**. Completed applications should be presented in person, with a form of government issued photo ID (driver license, passport, etc.), at the **IMPACT Booth in the Camden Campus Center-Main Lobby, 326 Penn Street, Camden Campus**. For more information, visit our website: <http://ruimpact@camden.rutgers.edu>.

Expiring Type 4 Casual Employee or Visiting Scholar ID Cards can be renewed by **submitting a new application form** and exchanging the expired ID for a new one. There is a \$15 replacement fee for lost, damaged or missing cards. Please do not discard your expired card.

***PLEASE PRINT LEGIBLY – COMPLETE ALL FIELDS – INCOMPLETE FORMS WILL NOT BE ACCEPTED:***

Legal Name: \_\_\_\_\_ ID Number: \_\_\_\_\_  
 Dept/Center: \_\_\_\_\_ Campus: \_\_\_\_\_  
 Campus Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Status: \_\_\_\_\_ Employee \_\_\_\_\_ Visiting Scholar/Guest (\$5 fee) \_\_\_\_\_ Other: \_\_\_\_\_

**Complete for Employees only:**

Position Title: _____	Division/Unit: _____
Payroll Type: _____ (1) Regular salaried _____ (4) Casual/hourly _____ (6) Teaching/graduate assistant _____ (7) Part-time lecturer _____ (8) Coadjutant casual** _____ (9) Post-doctoral fellow***	
<b>Appointment Start Date:</b> ____/____/____ <b>End Date:</b> ____/____/____	
All employees, except Type 1, will be issued an ID card valid for up to one year, renewable annually.	
** Not eligible for employee ID – a Guest Card will be issued      *** Graduate fellows are issued student ID cards	

**Complete for Visiting Scholars and other individuals:**

Length of Stay: From: ____/____/____	To: ____/____/____ (1 year maximum, renewable)
Permanent Address: _____ _____	

By signing below, the department chair, center director or dean certifies the accuracy of the information for the individual named on this form. The department/center will assist the Libraries to insure that the individual returns all borrowed materials at the end of the term specified, and sponsors the individual's use of all other university facilities.

_____ Original Signature of Unit Head (no stamps/surrogates)	_____ Date
_____ Print Name	_____ Phone
_____ Human Resources	_____ Date