

For Office Use Only — DO NOT WRITE IN THIS SPACE

Administrative Information			
Office	Office Number		Date
			m m d d y y y y
Justification			
O First time request O Renewal O Replace lost of stolen ID card (valid Bureaucracy Form 0017 Report Lost or Stolen ID Card required) O Other (describe below)			
Participant Information			
Prefix Last	First	Middle	Suffix
ID Number	Issue Date	Issuing Office Number	
	m m d d y y y y		
Nicknames and Aliases — Please list all other names by which you may be known			
Nicknames and Aliases — Have you applied for an ID Card in any other name?	Issue Date	Issuing Office	
No O Yes (list)		Issuing Office	
- The Creation	m m d d y y y y	Issuing Office	
		Issuing Office	
	m m d d y y y y	Issuing Office	
Photo Approval Control Number	m m d d y y y y	Issuing Office	
Signature — By signing here you affirm that all information on this form is true and	accurate to the best of your knowledge		Date
	, ,		m m d d v v v v
Office Information — FOR TEAM MEMBER USE ONLY			
Approved?			Date
○ Yes ○ No			m m d d v v v v
Justification (check all that apply)			
☐ Required information missing/incomplete ☐ Required documentation missing	g/incomplete Other (describe below)		
Team Member ID Number	Group Number	Office Number	
Supervisor ID Number	Group Number	Office Number	
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