

0004 Bureaucracy

Create Participation Candidate

For Office Use Only — DO NOT WRITE IN THIS SPACE

Candidate Information

Prefix	Last	First	Middle	Suffix
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Signature — By signing here you affirm that all information on this form is true and accurate to the best of your knowledge

Date mmddyyyy

Office Information — FOR TEAM MEMBER USE ONLY

Identify Verification

Description:

Candidate must present one valid form of photo identification in order to verify their identity for the purposes of participation in Bureaucracy. Valid forms of photo identification include but are not limited to: passport, driver's license, non-driver identification card, military identification card, and school identification card. Birth certificates, Social Security cards, or similar forms of identification that do *not* include photographs are *not* valid forms of identification for the purposes of participation in Bureaucracy. Other forms of photo identification *may* be accepted on a case by case basis with the approval of a supervisor.

Instructions to employee:

Record type of valid photo identification for each piece of identification. DO NOT RECORD: issuing authority, date of issue, any and all identification numbers, any and all address information, any and all personal information about candidate (including but not limited to date of birth, place of birth), any and all biometric information about candidate (including but not limited to height, weight, eye color, hair color), and any and all other personal or identifying information about candidate.

Identification type

- Passport
 Driver's License
 Non-driver identification
 Military identification
 School identification
 Other (please describe below and obtain supervisor approval)

Other description

Approved?

- Yes
 No (describe below)

Date mmddyyyy

Justification

Supervisor ID Number	Group Number	Office Number
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Candidate Approved?

- Yes
 No (describe below)

Justification (check all that apply)

- Required information missing/incomplete
 Required documentation missing/incomplete
 Other (describe below)

Participant Control Number	Issue Date	Issuing Office Number
Team Member ID Number	Group Number	Office Number
Supervisor ID Number	Group Number	Office Number

For Office User Only — DO NOT WRITE BELOW THIS LINE