

VENDOR ID AUTHORIZATION FORM

VENDOR EMPLOYEE INFO: (PLEASE PRINT)

LAST Name

FIRST Name

MIDDLE Name

EMPLOYER (Sodexo, Barnes and Noble, ABC Electronics, etc.)

DATE of BIRTH: _____ LICENSE #: _____ State of Issue: _____

REQUESTED BY: (PLEASE PRINT)

- I verify this employee is NOT a Liberty University student or employee.
- All individuals must present a valid government photo ID to be issued a vendor ID.
- I understand this employee must adhere to terms of acceptable use
- Authorization for access must be submitted to Access Control
- I authorize any costs associated with badge issuance to be invoiced to requesting department

LU Department (print)

Budget Org/Fund

Manager/Approval Signature

Date

-----DO NOT SIGN BELOW UNTIL FLAMES PASS IS ISSUED-----

- I acknowledge I received my vendor ID.
- I understand I will be responsible for the proper use and care of my vendor ID and that any misuse will result in the confiscation of this ID.
- I understand a fee will be charged for lost or damaged cards.

Vendor Employee Signature

Date

Sodexo only=LUDining Project
All others=VendorID Project
Media=unprinted DuoProxII

Bbts search 222000222
select first unprinted badge
modify w/name, dob and vendor name; capture prox # and sent to Access Control
IDWorks search using Bbts card number