Employee Photo ID and	Access C	ard Requisition Form	Form Serial No	Facility Name/Year/Serial No :
Please read the below instructi	ons befo	re filling-up the form	•	
<ul> <li>The Access Card and Display ID of</li> </ul>	card are no	n-transferrable.		
<ul> <li>In case you lose any of these card</li> </ul>	s please re	port to the Facility Helpdesk ir	mmediately to preven	t misuse.
Employee Name	:			
(Full name in Block letters)		First Name	Middle Name	Last Name
Applied for (Pls tick the Box)	:	✓ Access Card ✓ A	ccenture ID Card	✓ Display ID Card
Date of Joining	•		21	
[dd/mm/yyyy]	•		<del></del>	
[				
Career Level	:			
Emp ID Number	:	1323818	0	
Project Name/Department	:			
Business Unit	:			
		(ATC/AO/ICF/Consulting	ng)	
Building and City	:	-999999	Hyderabad	
bunding and City	•	Facility / Location Name		
		Tuellity / Location Tunic	•	
Emergency Contact Person	:	Suneetha	a	
<b>Emergency Contact Number</b>	:	(+91) 863978	8827	
Date: <u>20</u> / <u>09</u> / <u>2021</u>				Employee Ciar - 1
				<b>Employee Signature</b>
Date://		Nam	ne and Signature o	f HR representative
,,			<i>G</i> , <i>c</i>	

FO	R OFFICE USE BY WORKPLA	∩E
<u>10</u>	K OFFICE USE DI WORKFLA	<u>CE</u>
Name of the Helpdesk executive ve		
Access card no. (Issued) :		
Access Card Valid Till : (Based on Date of Joining)		
Date of Issue	//(Access Card)	
Signature of the Helpdesk Executive	—————————————————————(Access Card)	(ID Card)
Signature of the Employee	(Access Card)	(ID Card)
Form N63(OBT) Revision No.: 1.0		
Revision Date: 01/06/2018		

The information provided in this form will be used internally for generation of Employee ID and Access Card and to contact in event of an emergency only. We assure strict confidentiallity of the information provided). This information will be retained for a period of Current year + 13 months from the date you share the information with Accenture.