

**COOK COUNTY
EMPLOYEE IDENTIFICATION CARD
REQUEST FORM**

Date: _____

Non-Employee Date of Expiration: _____

Employee Name: _____

Social Security # (Last 4 digit): _____

Employee Identification Number: _____

Budget Title: _____

Department: _____ Dept. #: _____

STATUS OF EMPLOYEE CARD

_____ New I.D. Card to be issued

_____ Replacement of Worn-Out I.D. Card **(Fee waived only if old card is returned to I.D. Dept.)**

_____ Lost/Misplaced I.D. Card - \$10.00 fee **(PAYROLL DEDUCTION)**

_____ Stolen I.D. Card **(Police Report requested – fee waived)**

_____ Renewal with new expiration date for non-employee IDs

SPECIAL REQUEST (FEE WAIVED)

_____ Change in name Former Name: _____

_____ Change in title due to budget change

_____ Change in department due to budget change

_____ Transfer from one County Agency to another

Requested By: _____

(Please Print) *Timekeeper / Authorized Personnel*

_____ *Phone Number*

Submit Identification Request Forms via email to:

BHRIDRequests@cookcountyil.gov

or fax to 312-603-6004

To obtain a Cook County Identification Card report to:

Personnel Services Department

118 N. Clark St., Room 834

Chicago, IL 60602

Monday, Wednesday & Thursday 9:30am - 11:30am and 1:00pm -3:00pm