

## **Merck Employee Badge Request form**

**Instructions:** For New and Renewal requests, complete Sections 1 & 2 and email (preferred) or bring hard copy.

For Additional Site Access requests, complete Sections 1 & 2 and email/bring to Employee's Homesite.

For Reprint requests, complete Section 1 only and email (preferred) or bring hard copy.

Notes: Refer to Sync or Site Security web pages for badging instructions. Email buttons for submission are at the bottom of section 2

Section	n 1: PERSONAL INFORMATION (All Fie	lds must be complet	ed by the Employee)	
Request Type: New	uest Type: New Employee Additional Site Access		☐ Replacement ☐ Lost ☐ Broken ☐ Other:	
Note: Legal names must be e	ntered into Merck HR systems			
First Name: (Legal)		Department:		
Last Name: (Legal)		Title:		
WIN #:		Office Location:		
Home Site:		Office Phone #:		
Vehicle #1	Vehi	cle #2	Vehi	cle #3
Make:	Make:		Make:	
	NA I . I		Model:	
Color	Color		Color:	
License Plate:	License Plate:		License Plate:	
Section	2: ASSIGNMENT INFORMATION (All fie	elds must be comple	ted by Employee's sup	ervisor)
ΑN	Nove request must be submitted for a ne	w employee prior to r	eceiving an ID badge.	
	Move Request #: R			
	Site Access Requ	<u>iested</u>		
Genera	al Office Sites	<u>GMP S</u> (Additiona	<u>sites</u> Il site specific training m	ay be required)
☐ Upper Gwynedd	☐ Branchburg	□ Ke	nilworth	
Church Road	☐ Whitehouse Station West		Rahway	
☐ Boston / Cambridge	_		West Point	
	S. San Francisco	No	orth Wales (General acces	ss only)
	3. Sail Halleiseo			
	Other:			
Supervisor Phone #				
Supervisor Signature:				
By signing this fo	rm, the Supervisor has verified that t	he information pro	vided in Sections 1&2	is accurate.

Submit to Home Site:

	Section 3: SECURITY VERIFICATIONS (All fields must be completed by Security)					
		and to impleted by Sec				
Photo ID verified by: Badge	# issued:	Date:				
Section 4: TERMS AND AGREEMENT (To be rea	d and signed by th	e Employee at time of re	ceiving ID Badge)			
While working at a Merck Facility, I agree to the following:						
I have received Merck Site Orientation and understand my resport. I have had the opportunity to ask questions about anything I did. I agree to perform my job in accordance with all Merck, OSHA, Fe. I understand that my employer and I are responsible for providing. I understand that my badge is for my personal use only. My badg. I understand that if my Merck Photo ID Badge is lost/stolen, I. I understand that my Merck Photo ID Badge must be visible and of I understand that this Merck Photo ID Badge must be surrendered. I understand that if I violate any of Merck's policies\procedures mod. I understand that all emergencies, accidents or injuries occuring on the second	not understand during deral/State, and other gall personal protecting will never be used to must report it immedisplayed when on Medit of Site Security at the gall Merck Photo ID Badding deral/State (1) and the site Security at the gall Merck Photo ID Badding deral/State (1) and the site Security at the gall Merck Photo ID Badding deral/State (1) and the site Security at the site of the	g training.  applicable laws and safety reve equipment to perform my provide access for another diately to my Supervisor are erck property at all times.  e end of my assignment or up ge will be confiscated and me	equirements. y job safely. person. nd Site Security. pon request. ny site access terminated.			
I agree that all information on this form is accurate to the k to Merck Facilities for providing false information.	pest of my knowled	ge and understand that I	can be restricted from access			
Signature:		Date:				