

SHIFT DUTY BADGE APPLICATION

MUST PRESENT EMPLOYER IDENTIFICATION MEDIA/BADGE FROM HOME AIRPORT

ISSUANCE INFORMATION (THIS SECTION TO BE COMPLETED BY MNAA ISSUER ONLY)

SHIFT DUTY BADGE #		DATE		TIME	
REASON FOR ISSUANCE (CIRCLE ONE)	TRANSIENT LOST BNA BADGE STOLEN BNA BADGE BADGE MALFUNCTION				
ENTER BNA BADGE NUMBER IF LOST, STOLEN, OR MALFUNCTION			*Must be reported/confirmed that the AOC has deactivated the lost or stolen badge		
TRANSIENT BADGE NUMBER (FROM HOME AIRPORT)			HOME AIRPORT NAME		

RECEIVING EMPLOYEE INFORMATION AND ACKNOWLEDGMENT (PLEASE PRINT)

COMPANY NAME					
EMPLOYEE'S LAST NAME					
EMPLOYEE'S FIRST NAME					
EMPLOYEE'S PHONE NUMBER					

The Shift Duty badge allows you to perform your duty unescorted in authorized areas only (determined by your existing badge access). You will still need your (sponsoring) supervisor to gain access through doors and gates. This badge must not be taken off airport property. You or your supervisor are required to return this badge after the amount of approved time has ended. If you were issued this badge due to a lost/stolen badge, you are required to pay \$100.00 for a lost badge or \$25.00 for a stolen badge (police report required). If you find your lost badge at a later date (before the badge's expiration date) you will receive a reimbursement of \$50.00. A confirmed dead badge will be replaced at no charge provided the dead badge is returned beforehand. Shift Duty Badges are only authorized for 24 hours unless otherwise approved, not to exceed 7 calendar days at a time, and 14 calendar days a year.

EMPLOYEE SIGNATURE _____ DATE _____

SPONSORING SUPERVISOR INFORMATION AND ACKNOWLEDGMENT (PLEASE PRINT)

As the sponsoring supervisor you are responsible that the employee understands what areas he is allowed to present in. You will also ensure the badge is not taken off airport property. You are also responsible that this badge is returned to the Identification Office after the amount of approved time has ended. Failure to do so will result in your BNA badge being deactivated until the Shift Duty badge is returned.

BNA SUPERVISOR NAME (PLEASE PRINT)		BNA BADGE #	
BNA SUPERVISOR SIGNATURE _____		DATE _____	

MNAA ISSUER WILL ENSURE THE FOLLOWING (PLEASE CHECK ALL THREE BOXES):

LOST/STOLEN BADGE WAS DEACTIVATED (IF APPLICABLE)

ENSURE EMPLOYEE UNDERSTANDS PROCEDURES AND APPLICATION FILLED OUT COMPLETELY

MNAA ISSUER'S NAME (PLEASE PRINT)			
MNAA ISSUER'S SIGNATURE			