

NOVACard Special Affiliate or Contractor Card Request

Affiliate or Contractor Information—to be completed by the sponsoring office/department

Affiliate or contractor name: _____ Date of birth: _____

Department: _____ Start date: _____ End date: _____

Status: (please check one)

- Contractor
- Volunteer (not on Human Resources payroll)
- Other, please describe: _____

Sponsoring office/department: _____

Sponsoring supervisor name (please print): _____

Supervisor's signature: _____ Date: _____

E-mail: _____ Extention: _____

Optional—Additional college services to be extended

The sponsoring office/department may elect to authorize additional services once the affiliate receives an identification card from the NOVACard Office. The sponsoring office should contact the appropriate office to arrange for these services.

Card access to College buildings:

After the NOVACard has been issued, card access to buildings may be requested by filling out form 105-008 found here: www.nvcc.edu/forms/faculty/bynumber.asp

OFFICE USE ONLY

Rejected:
Reason: _____

Approved:
Supervisor's signature: _____ Date: _____
ID #: _____