



PERSONNEL ORDERS DIVISION
Retiree/Non-Member Identification Card Worksheet
PB Revised 12/8/2020

PLEASE PRINT CLEARLY

Please Indicate: New Applicant Lost ID Card Renewal, Card # _____

Last Name: _____ **First Name:** _____ **MI:** _____

Date of Birth: ____/____/____ **Phone Number:** (____) _____ - _____

Social Security Number: _____ - _____ - _____ **Gender:** _____

Home Address: _____ **Apt.** _____

City: _____ **State:** _____ **Zip Code:** _____

RETIREE INFORMATION ONLY

Rank: _____ **Retirement Date:** ____/____/____

Tax # _____ **Shield #** _____

I certify that the information I provided on this worksheet and on any supporting documentation is true and complete. If I am applying for a retiree identification card, I further certify that since my retirement date, I have not been convicted of a crime.

Signature

____/____/____
Date

FOR OFFICE USE ONLY

Member Processing Request: _____ **Tax #** _____

Case # _____ **Firearms Code:** _____ **New ID Card #** _____

Approved

Disapproved

Authorizing Supervisor Rank/Name

Signature

(Authorizing Supervisor is to ensure there is a copy of newly issued Identification Card attached to this worksheet)

AUTHORIZED INDIVIDUAL RECEIVING IDENTIFICATION CARD

Name: _____ **Signature:** _____