



# The Independent School District of Boise City

8169 W. Victory Road  
Boise, Idaho 83709

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Fax: (208) 854-4010  
Email: subs@boiseschools.org

## REQUEST FOR SUBSTITUTE IDENTIFICATION BADGE

***Please complete the top portion of this form and submit to the Substitute Office. The Substitute Office will notify you once your badge is ready for pickup. Substitute identification badges are available to substitutes who have worked a minimum of 10 days in a school year. To request a badge after completing 10 assignments, please submit this request form.***

Name: \_\_\_\_\_ Sub/Employee ID Number: \_\_\_\_\_ Date: \_\_\_\_\_

By checking this box, I acknowledge that I have worked a minimum of 10 days as a substitute.

## SUBSTITUTE IDENTIFICATION BADGES

Badge number \_\_\_\_\_ issued to \_\_\_\_\_ on \_\_\_\_\_, is to be worn at all times while on District property.

As a Boise School district substitute, you are responsible for this badge. If it is lost or stolen, please contact the Boise School District Employment & Benefits Office at 854 - 4073. Lost, stolen or mutilated badges will be replaced at the Employment & Benefits Office and the district may charge a \$10.00 replacement fee.

As Boise School District property, this badge must be relinquished upon resignation/termination/transfer. Please turn badge into the Substitute Office upon your separation from the District.

My signature below acknowledges that I have read and understand the above badge policies.

I understand that this badge is to be worn at all times while on district property.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
*Substitute Signature*