

**Banner ID Request Form
Identity Management Office
Auburn University**

To be completed by AU Hosting Department. All fields must be filled.

Incoming Scholar Information

Full Name (as in passport): _____
Last/Family Name First/Given Name Middle Name (if any)

Date of Birth: _____ Gender: Male Female

Address in Home Country: _____

Phone Number: _____ Email Address: _____

Title: **VISITING EXCHANGE SCHOLAR**

- EMPLOYED** Banner ID Request
Exchange Visitors that will be paid by Auburn University
- New Hire – new employee to Auburn University
 Rehire – has been previously employed by Auburn University but has a status of terminated
 Current Employee
Position Number: _____

- AFFILIATE** Banner ID Request
Exchange Visitors that will not be paid by Auburn University

Departmental FOAP: _____
The hosting department will be charged \$25 by the Identity Management Center for the production of any affiliate exchange visitors' campus ID cards. This will be charged to the department at the time of the scholar's arrival.

The following must be filled out for EMPLOYED and AFFILIATE

Home Dept. Organization Code: _____ Dept. Name: _____
Check Distribution Number: _____ District/Division Number: _____
Dept. Location ID Number: _____
Scholar Begin Date: _____ Scholar End Date: _____
Date Form was Prepared: _____ Form Prepared By: _____
Preparer Phone Number: _____ Preparer AU Username: _____

Required Signatures

Department Chair: _____ Date: mm/dd/yyyy
Dean: _____ Date: mm/dd/yyyy
Provost Office: _____ Date: mm/dd/yyyy
(Kerry Ransel)