

TEXAS TECH EL PASO POLICE

To: Chairperson, Administrator, or Department Manager

From: Texas Tech El Paso Police Department

Subject: Authorizing Signature

The Texas Tech El Paso Police Department is responsible for issuing identification/access badges to the Texas Tech University Health Sciences Center El Paso campus. We have implemented a signature authorization procedure to be utilized with identification/access badge processing. Please have each person that has been granted the authority for such requests to print their name, title, and sign in the space provided below.

Please return this form to the attention of the Texas Tech El Paso Police Department by inter-office mail to the address provided above or by email to ttpelpaso@ttuhsc.edu.

Thank you for your prompt attention to this matter.

Name:
Title:
As the authorized signer, I understand that I am responsible for determining the employee's access needs, based on job duties, and responsible for the employee's use of the badge. I certify I have reviewed OP 76.02 and acknowledge my responsibilities.
Signature:
Name:
Title:
As the authorized signer, I understand that I am responsible for determining the employee's access needs, based on job duties, and responsible for the employee's use of the badge. I certify I have reviewed OP 76.02 and acknowledge my responsibilities.
Signature: