



Policy Statement: 4110  
Policy Area: General Administration  
Date: November 16, 2004

# POLICY STATEMENT

Approved:   
Susan W. Shaffer, Director

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## AGENCY CREDENTIALS WITH BADGES OR MEDALLIONS

### I. INTRODUCTION

The District of Columbia Pretrial Services Agency (hereinafter, "Agency") plays a critical role in law enforcement and public safety in the District of Columbia. As such, an Agency credential with badge or medallion, containing information required to establish purpose and authority in the employee's performance of duty, is issued to eligible employees. The Agency credential is an identification document bearing the official Agency seal and the signature of the Director.

### II. PURPOSE

The purpose of this policy is to establish procedures for the use and issuance of Agency credentials.

### III. COVERAGE

This policy applies to all Agency personnel with the exception of interns, contractors, and consultants.

### IV. POLICY

It is the policy of the Agency to issue credentials to eligible employees for the purpose of establishing authority and identity in the performance of Agency duties. The Agency uses two types of credentials: those with badges and those with medallions. Employees eligible for the credential with badge are those occupying the positions of Pretrial Services Officer ("PSO") or those who have recurring public safety related Agency business with government agencies or private organizations. All other employees receive the credential with medallion.

## V. PROCEDURES

- A. **Issuance.** Agency credentials are issued to all new employees through the Training and Career Development Center (hereinafter, "Training Center") within 45 days of service. All new employees will be contacted by the Training Center to have a photograph taken.
- B. The Agency Director, or designee, will personally issue the credential with badge or medallion to each new employee at the conclusion of the New Employee Orientation Program or other designated time.
- C. **Acknowledgement.** Each employee must acknowledge receipt of the credential with badge or medallion by signing the Credential with Badge or Medallion Acknowledgement Form (see Attachment 1).
- D. **Loss or Theft.** The loss or theft of the credential, badge or medallion must be reported immediately to the Training Center. The initial report must be made by telephone or via e-mail, and followed by the submission of the Credential Replacement Request Form (see Attachment 2) within five (5) working days from the date of knowledge of the loss or theft. The report must include a detailed explanation of the circumstances surrounding the loss or theft. If the item is stolen, any information related to a formal police report (e.g., if the credential is stolen along with a purse and the police are contacted) should be included in the explanation. In the event the lost or stolen item is recovered, it must be returned immediately to the Training Center for cancellation.
- E. An Employee may be required to reimburse the Agency for a replacement badge or medallion if the loss is due to the negligence of the employee. The Director of the Training Center will make the initial assessment as to negligence and provide a written recommendation to the Director of the Office of Human Resources, Strategic Planning, Analysis and Evaluation ("HRSPA"). If the Director of HRSPA concurs with a finding of negligence, the employee will be assessed a fee. If the employee wishes to challenge the decision, (s)he may submit a written appeal to the Deputy Director, PSA. The decision of the Deputy Director, PSA is final.
- F. **Wear and Tear.** Should a credential with badge or medallion become worn, damaged, or otherwise unserviceable, it may be replaced. The unserviceable item must be returned to the Training Center for a replacement. A Credential Replacement Request Form must be submitted along with the original item to the Training Center for replacement.

- G. **Name/Title Change.** In the event an employee changes his/her name or there is a change in job title, he/she must complete a Credential Replacement Request Form for the issuance of a new credential.
- H. **Safekeeping.** The employee is responsible for keeping the credential with badge or medallion in a secure location at all times. The credential with badge or medallion must always be in the employee's immediate possession while performing her/his official duties or secured in a locked location.
- I. **Use and Misuse.** The Agency credentials must be used for official Agency identification only. They should only be displayed when identifying oneself as an Agency employee in order to conduct official Agency business. Use of the Agency credentials for any other purpose may result in disciplinary action.
- J. **Termination from the Agency.** Upon termination of employment with the Agency, employees must return the credential with badge or medallion to the Training Center or Office of Human Resources, Strategic Planning, Analysis and Evaluation ("HRSPAE"). However, on a case-by-case basis, the Director or Deputy Director may submit a written directive to the Training Center, with instructions that a badge or medallion be prepared for presentation (for example, in a Lucite case) to the employee as a keepsake for long-term and/or honorable service.
- K. **Disposition.** The credential with badge or medallion remains the property of the Agency and must be returned to the Training Center or HRSPAE whenever the employee resigns, retires, is transferred, terminated, or otherwise separated from the Agency and no longer requires the credential.

**CREDENTIAL ACKNOWLEDGEMENT FORM**

**Credential # P**

**TO:**

\_\_\_\_\_

Name

SSN

Position

I hereby acknowledge receipt of the District of Columbia Pretrial Services Agency credential with badge or medallion (**number** \_\_\_\_\_). I agree to comply with applicable Agency policy and the procedures specified below:

**SAFEGUARDING:** I accept responsibility for safeguarding the Agency credential with badge or medallion issued to me. It will be protected against loss or theft. I understand **a fee may be charged for a lost badge or medallion or theft of a badge or medallion not on my person.**

**USE:** I will use the credential with badge or medallion for official purposes only and will not loan, give or otherwise allow any other person to use these items for any purpose. I will use the credential with badge or medallion for official Agency identification only.

**REPORTING LOSS OR THEFT:** I will immediately report any loss or theft of the credential, badge or medallion to the Training and Career Development Center at (202) 442-1935. I must also submit a Credential Replacement Form within five (5) working days from the date of the loss or theft acknowledged by me. Should I subsequently recover my lost or stolen credential, badge or medallion, I will promptly return it to the Training and Career Development Center.

**RETURN OF THE CREDENTIAL WITH BADGE OR MEDALLION:** I will promptly return the credential with badge or medallion to the Training and Career Development Center or the Office of Human Resources or designee when my employment with the D.C. Pretrial Services Agency terminates or upon request of the issuing authority.

NOTE: Care of the badge simply requires washing it with soap and water on a periodic basis. Under no circumstances should the badge be scrubbed with a brush or abrasive polish, as this will remove the protective coating of lacquer and the badge will tarnish.

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

### CREENTIAL REPLACEMENT REQUEST FORM

Employee Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_

REASON FOR REQUEST: (Unserviceable, Lost, Stolen, Name Change, or Title Change): \_\_\_\_\_

If your credentials have been lost or stolen, you must provide an explanation in the space below. Attach police report if applicable.

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\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**If you are requesting that a new credential with badge or medallion be issued due to a name or title change, please complete the section below (you must provide proof of a name change):**

NEW NAME TO BE LISTED ON CREDENTIALS: \_\_\_\_\_  
Last Name, First Name

NEW TITLE TO BE LISTED ON CREDENTIALS: \_\_\_\_\_  
Official Agency Title

**To be completed by Training and Career Development Center**

Date Request Received: \_\_\_\_\_ Rec'd By: \_\_\_\_\_

Amount Charged: \_\_\_\_\_ Date Paid: \_\_\_\_\_

New Badge/Medallion Number: \_\_\_\_\_ Old Badge/Medallion Number: \_\_\_\_\_

New Credentials Issued: \_\_\_\_\_