



NEW MEXICO CORRECTIONS DEPARTMENT

Secretary
Alisha Tafoya Lucero

CD-031500 NMCD Identification Badges	Issued: 01/23/84 Effective: 01/23/84	Reviewed: 4/24/26 Revised: 02/23/15
Alisha Tafoya Lucero, Cabinet Secretary		<i>Original Signed and Kept on File</i>

AUTHORITY:

NMSA 1978, Section 33-1-6

REFERENCE:

None

PURPOSE:

To ensure proper security and identification of all NMCD employees, contractors and volunteers.

APPLICABILITY:

All New Mexico Corrections Department employees, contractors, volunteers and individuals granted provisional access.

FORMS:

Central Office Badge and Fingerprint Information form (*CD-031501.1*)

DEFINITIONS:

- A. NMCD Employee: All employees assigned to work in the Corrections Department, (i.e. Central Office, Training Academy, Probation and Parole Division, Adult Prisons Division, Recidivism Reduction Division, Corrections Industries and prison facilities)
- B. NMCD Volunteer: A person who donates his/her time and effort to enhance the activities and programs of the New Mexico Corrections Department. Allowed to serve as volunteers on the basis of their skills or personal qualities to provide services in recreation, counseling, education, religious activities, advisors, interpreters, etc.
- C. NMCD Contractor: Individuals employed by contracted vendors who provide services to the agency and/or institutions (i.e. medical, food service, etc.)

POLICY:

- A. All NMCD staff will be issued an employee identification card to ensure proper security and identification of employees.
- B. All individuals granted provisional access will be issued a non-employee badge.



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AUTHORITY:

Policy *CD-031500*

PROCEDURES:

- A. The following procedures shall be implemented to ensure proper security and identification.
 1. Identification Cards:
 - a. All individuals working within the Corrections Department shall be issued an identification badge specific to their assigned status (i.e. employee, contractor, volunteer, and non-employee).
 - b. Employee Identification Cards may contain the following information:
 - 1) The title, "State of New Mexico Corrections Department";
 - 2) A photograph of the employee;
 - 3) Name of person;
 - 4) Work Location (Central Office, Facility Name, Probation & Parole, etc.)
 - 5) Employee ID #;
 - 6) Position Title;
 - 7) Hire Date;
 - 8) Height
 - 9) Eye color
- B. Central Office Employees/Provisional Access Individuals
 1. Security access for Central Office will be approved as follows:
 - a. Security access shall only be obtained by the requesting supervisor completing the **Badge** form (*CD-031500.1*) indicating the access level and time necessary for access.
 - b. Level 1 (access from Sunday through Saturday, twenty-four (24) hours per day) requires prior approval from the Deputy Secretary of Administration and must

be justified in writing.

- c. The Human Resource Director shall have approval authority for level 2 (access from Monday through Friday from 6:00 am through 10:00 pm).
 2. The employee's supervisor will be responsible for scheduling a date and time with the Human Resources Bureau for the employee to take his/her photograph.
 3. Any employee who has lost their identification cards shall immediately notify the Human Resource Bureau. The employee shall provide the Human Resource Bureau with a written statement indicating that the card was lost and the circumstances.
 4. Individuals who lose their identification cards will be required to pay \$10.00 to the Administrative Services Division before obtaining a replacement card.
 5. Central Office employees are required to wear their employee identification cards when entering any correctional facility while conducting business for the Corrections Department.
 6. The employee identification card shall not be worn below the waist and must be displayed at all times.
- C. The employee identification card must be returned to the respective Human Resources office upon termination of employment with the Corrections Department.

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Central Office Badge Information

BADGE:

Name (Print): _____
Last Name First Name Middle Name

Division: _____ Title: _____

Requesting Supervisor: _____ / _____
(Print) (Sign) Date

Access Levels:

- Central Office Employee (6am – 10pm)
- Information Technology Employees
- Cadet
- Contractor
- Volunteer
- Activity

Times:

- Level 1: Sunday-Saturday 24 hours per day (*Requires written justification*)
- Level 2: Monday-Friday 6:00 am-10:00 pm
- Other: _____
(Explain in detail)

HR Director: _____ / _____
(Print) (Sign) Date

Dep. Sec. of Admin: _____ / _____
(Print) (Sign) Date

