INFOTREE Sdn. Bhd.

STAFF CARD / E-MAIL APPLICATION FORM

Part A (To Be Completed By Employee)

Type Of Application
(Tick √ whichever is applicable)

☐ New Staff Card

☐ Damage/Replacement Card

☐ Lost Card

☐ Staff Email

☐ Finger Print Time Attendance

Full Name _____
Staff ID _____
Designation _____
Company _____
Division/Dept _____
Regional _____
Ext. / Hp No. _____

Requester

Signature:
Name:
Designation:
Date:

Management Approval

Signature:
Name:
Designation:
Date:

Part B (To Be Completed By Infotree)

☐ Staff Card   **Date:**

☐ Email   **Date:**

Email ID   :
Default Password   :

☐ Helpdesk   **Date:**

Helpdesk User ID   :
Default Password   :

☐ Finger Print   **Date:**
  Time Attendance

Finger Print ID   :

Card Charges:-	RM
☐ New	12.00
☐ Damage/Replacement	12.00
☐ Lost	20.00
☐ Lanyard	3.00
☐ Cardholder	1.00

Delivery:-

☐ Post/Courier

TOTAL _____

Part C – Collection & Payment

Card Collected By

Signature:
Name:
Designation:
Date:

Payment Received By

Signature:
Name:
Designation:
Date:

Note: Regional Offices - Please attach money/postal order together with application form.