

# SAN DIEGO POLICE DEPARTMENT

## Media Identification Card Application

New \_\_\_\_\_ Renewal \_\_\_\_\_

No. _____
Exp. _____
(FOR OFFICE USE ONLY)

Name \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE INITIAL)

Home Address \_\_\_\_\_  
(STREET ADDRESS) (CITY) (ZIP CODE)

Date of Birth: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Business Address \_\_\_\_\_  
(STREET ADDRESS) (CITY) (ZIP CODE)

Date Hired \_\_\_\_\_ Home Ph: \_\_\_\_\_ Bus. Ph: \_\_\_\_\_

I understand that possession of a San Diego Police Department Media Identification Card is a privilege granted by the Chief of Police to those who have a regular need to cross police and/or fire lines. The Chief of Police reserves the right to deny or revoke a card, according to the guidelines established in San Diego Police Department Procedure 1.31.

\_\_\_\_\_  
(Applicant's Signature) To be signed upon retrieval of ID

I certify that this individual is employed full time and has a regular need to cross police and/or fire lines. I will be responsible for retrieving the Media Identification Card upon this employee's resignation or termination and for returning it to the Media Relations Office of the San Diego Police Department.

\_\_\_\_\_  
(Supervisor's Printed Name)

\_\_\_\_\_  
Supervisor's Phone number

**Submitting Completed Application:** All applications should be e-mailed to **MediaID@PD.SanDiego.Gov**. When the application has been processed, you will be notified by e-mail. Should additional information be needed by the Media Relations Office, the applicant will be contacted by phone or e-mail. Once the application has been processed and approved, bring the confirmation e-mail and your photo ID to SDPD Headquarters 1401 Broadway St. (8 a.m. to 4 p.m., Monday through Friday) to complete the credentialing process. Do not bring photographs; your photo and signature will be transferred to the media card by computer. The entire process should take no more than ten minutes. There is no cost to you. **If you do not complete the credentialing process within 30 days of approval of this application, you will be required to reapply for the credential.**

Approved: \_\_\_\_\_  
(SDPD AUTHORIZING AGENT)