

(Insert company name and or logo)

Receipt Acknowledgement of Name Badge

Name badges must be worn above the waist and visible during all interactions with patients. The best places to wear name badges would be:

- Pinned to the front of work attire
- Attached to the front pocket of scrubs
- Around the neck on a lanyard

I, _____ have received a name badge. I understand that it is to be worn at all times during my shift.

If this badge is lost, I understand I will be responsible for the cost to purchase a replacement.

Signed

Date