

Request for Replacement Student Id card

Student Number		Faculty	
Student Name		Program	
phone number		Email Address	

I certify that I require a replacement card for the following reason (*tick box*):

lost

destroyed

stolen

Student Signature:

Date

If your card has been lost, stolen, destroyed or needs to be re-issued, a **3 O.R. REPLACEMENT FEE** applies. Please make payment to The Cashier, located in Student Administration.

Office Use Only

Finance

Being payment of 3 O.R. for replacement Student ID Card

Date Paid:

Receipt No: Signature: Date:

Student Administration

Student details checked by (Signature)

Confirmation of Receipt of Replacement Student ID card

I (Student name) received from
Student Administration the replacement

Student ID card

Student Signature: Date: