



ID Card Request

Cardholder Information

Name: _____
Last First MI

University Affiliation

- Student
 - Undergraduate
 - Graduate
 - Pre-College
- Employee
 - Staff
 - Faculty
- Special Faculty
- Emeritus Faculty
- Staff Retiree

Reason for Request

- Initial Card Request
No payment required for first card.
- Lost
Replacement fee of \$25.
- Worn/Damaged
Replacement fee of \$5 (prior to expiration)
- Stolen
Replacement fee of \$25, unless police report is presented.
- Renewal of Expiring Card
Replacement fee waived if current card is surrendered.
- Name Change
*Please complete Change of Name form.
Replacement fee waived if current card is surrendered.*
- Other (specify): _____

Payment Information

- Cash
- Credit/Debit
- Student Account
- Check payable to Carnegie Mellon
- Plaid Ca\$h
- No Charge

Signature

I certify that the information provided and contained on this form is accurate and correct.

Signature: _____ Date: _____

Office Use Only

PIK: _____ Check #: _____