COPY CARD REQUEST

For Winona State University Accounts

Check one of these: ☐ Add ☐ Delete ☐ Change

Then check one of these: ☐ WSU ID ☐ New Departmental or Student Group Card

The following employee and/or student is authorized to be issued a Winona State University Copy Card for the cost center listed below. Please use a separate form for each person (if you are requesting the activation of a WSU ID card) or for each cost center for new Departmental or Student Group cards.

Completed forms must be submitted to the Campus Card Office, Maxwell 227.

Applicant Name: _____

Applicant Tech ID: _____ (If activating WSU ID card)

Campus Phone #: _____

Campus Address: _____

Email Address: _____

Cost Center Name: _____

Cost Center #: _____

All charges made against the copy card are the direct responsibility of the individual, group, or organization requesting a card.

_____ _____

Applicant's signature Date

_____ _____

Supervisor or Advisor Signature Date

(Must be the signature of the person responsible for cost center budget.)

For office use only:

Business Office Authorized: _____

Patron ID #: _____ Assigned by: _____ Printed by:_____

Picked up by:

_____ _____ _____

Name Signature Date