

Student Form

CLIPPERCARD

PLEASE COMPLETE THIS FORM AND HAVE A
GOVERNMENT ISSUED PHOTO ID READY

Preferred First Name: _____

Legal First Name: _____

Last Name: _____

SSU Student ID Number: _____

ClipperCard Acknowledgements

- (a) I certify receipt of my ClipperCard which includes my correct photo, name, and User ID Number.
(b) I certify acceptance of the ClipperCard Cardholder Rights & Responsibilities (available online).

Signature: _____ Date: _____

<u>For ClipperCard Use Only</u>	
Card Issued By (Initials): _____	Date: _____
Identity Verified: <input type="checkbox"/> License <input type="checkbox"/> State ID <input type="checkbox"/> Passport <input type="checkbox"/> Military ID <input type="checkbox"/> Other _____	

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