



ID CARD Replacement Application

The Monarch Card Office Staff will receive your application and reach out shortly to provide you with a pick-up date/time. If you wish to change your photo, attach your headshot to this form in a JPEG FORMAT.

ODU UIN

Your answer _____

Last Name, First Name:*

Your answer _____

Email: *

Your answer _____

Cell Phone: *

Your answer _____

STUDENTS: I UNDERSTAND THAT THE \$15 REPLACEMENT FEE WILL BE BILLED TO MY STUDENT ACCOUNT W/IN 24 HOURS. I WILL MAKE PAYMENT DIRECTLY TO THE FINANCE OFFICE.

FACULTY/STAFF: I WILL PAY USING A DEBIT/CREDIT CARD WHEN I PICK UP MY ID.

SIGNATURE: _____ DATE: _____

Card Center Team Member Signature: _____

