Campus Card Application

Please print	:							
Name:	Last Name			First Name			MI	
Stony Brook	ID Number:							
Status: (check one)	Faculty/Staff	Student	X Affilia	ate V	/olunteer	Visit	or	
Stony Brook University Card Regulations: • The Stony Brook ID card is the property of the issuer. • There is a replacement fee for lost, stolen or damaged campus cards. • If your card is lost or stolen, please report it immediately to the Campus Card Office. • The StonyBrook ID card shall not be transformed, altered or tampered with in any way. • Campus departments may not hold the Stony Brook ID card for any reason wth the exception of University Police if such is required in the performance of their duties. • Campus Card photographs can be used for identification purposes in other matters of University business. • Cardholders are advised not to lend cards to anyone. • Hospital Access bagde status is not guaranteed by the Campus Card Office; if there is a question regarding the badge you are to be issued, you will be referred to the appropriate office. • The retrievable stored values on the card remain the property of the card holder. By signing the box below, you agree to the terms and conditions listed above. Signature								
	Use ONLY: rnment issued photo een Card # □ Drive		Passport # 🛭			S	Date	