

Auraria Campus ID Authorization/Charge Form

AHEC **CCD** **MSU Denver** **CU Denver** **AELC**

CARDHOLDER NAME:

ID NUMBER:

(MSU Denver: 900#. CCD: S#. CU Denver: Student/Staff ID#. AHEC: Position#)

Social Security Numbers Not Accepted

TITLE:

DEPARTMENT:

DIVISION:

ACCOUNT #:

(REQUIRED FOR ALL CHARGES)

Smart Cards are \$22. All other cards are \$12.

Please check the appropriate categories:

Executive <input type="checkbox"/>	Faculty <input type="checkbox"/>	Staff <input type="checkbox"/>	Student <input type="checkbox"/>
Contractor <input type="checkbox"/>			
Full-Time <input type="checkbox"/>	Part -Time <input type="checkbox"/>		Temporary <input type="checkbox"/>
Charge Department <input type="checkbox"/>		Employee will pay <input type="checkbox"/>	

MSU Denver Accounts

F _____ fund
O _____ org
A _____ acct
P _____ prog
A _____ act
(if applicable)

The following must be presented for an ID card:

- This Authorization/Charge form
- Valid picture ID
- All ID's require an ID Number issued by the institution
- A valid account number (for any charges)

Cardholder Signature: _____ Date: _____

Authorizing Signature: _____ Date: _____

FOR AHEC ID CENTER USE ONLY

Prepared by: _____
Date: _____

