Custodian Change Form for Student One Cards Email: <u>OneCard@umsystem.edu</u>
Columbia KCity Missouri S&T St. Louis
Date of Request:
Name as Shown on Student Card:
Last 4 Digits of Card Number:
Current Custodian Information
Current Custodian:
(The Current Custodian's Employee ID & contact information will now be removed from this Student Card)
<b>Replacement Custodian Information</b>
Replacing Custodian:(Print Name)
Employee ID:     Phone: ( )
Email:
I certify that as a Custodian, I have completed the required trainings (if necessary at this time) and I fully understand the policies and procedures associated with accepting this card.
As the Card Custodian, I will secure each Student One Card when not in use. Prior to releasing a Student One Card, I will inform student of policies, procedures, and card limits. I will track the checkout and use of the One Card by students and ensure that required Documentation has been obtained for each transaction.
By signing this document you agree to all the terms and conditions of the Student One Card listed above.
(Replacement Custodian Signature)
Approving Official's Approval
Approving Official Signature Approving Official Printed Name