Custodian Change Form for Student One Cards
Email: OneCard@umsystem.edu

☐ 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: __________________________ (Print Name) __________________________ (Signature) If not available, write NA

(The Current Custodian’s Employee ID & contact information will now be removed from this Student Card)

Replacement Custodian Information

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)

Financially Responsible Individual (FRI) Approval

The Financially Responsible Individual (FRI) is the person designated at the Level 3 College/School/Division, and can be identified in MIS Web APPS> FIN Finance Structure. This form will not be accepted if sent by anyone other than the FRI on record. The FRI is responsible for communicating changes to his/her cardholders’ accounts.

________________________________  __________________________
Financially Responsible Individual’s Signature  Financially Responsible Individual’s Printed Name