

Custodian Change Form for Student One Card

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

Current Custodian Employee ID: _____

(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