



Request for FIT Student Identification Number

Student Information

****FORM MUST BE SUBMITTED ALONG WITH A COPY OF A PHOTO ID****

Name _____
Last *First* *MI*

If you attended FIT under a different name, please not it below:

Last *First* *MI*

Date of Birth _____

Dates of Attendance: from _____ to _____

Daytime Phone Number _____

- This form must be submitted along with a legible copy of photo identification.
- Requests will be processed with 24 hours from the time the request is received.
- Student identification numbers are not available for students who attended prior to 1982
- Student identification numbers will only be given via email or fax, not by telephone.
- No request will be processed unless all College holds (financial, medical, etc.) have been fulfilled.

Method of Contact

Please e-mail my student identification number to _____

Please fax my student identification number to _____

Signature

I hereby authorize FIT to release my identification number to me at the email and/or fax number listed above.

Student Signature _____ Date ____ / ____ / ____