

ID CARD APPLICATION FORM 2017

For students living outside Dunedin during study ONLY



This form is for Distance Learning students and other students who are unable to attend the Dunedin ID Card Office during study.

Course Declaration must be completed before an ID card can be issued, so there could be a delay between our receipt of this application and your receiving an ID card.

You must have an ID card to access the Library systems and at examination time as proof of identity. If you have any queries, please email: idcard.officer@otago.ac.nz or telephone 64 3 479 5330. For more information about your ID card please refer to the 2017 *Guide to Enrolment*.

Please complete Sections A, B and C.

SECTION A: Please indicate which of the following you are studying via:

- I am enrolled in the Distance Learning Programme.
- University of Otago, College of Education Southland Campus
- University of Otago, Christchurch
- University of Otago, Auckland Centre
- Summer School Programme, Wellington
 - Send in this completed form to the ID Card Office who will post your card to the address you state below.
- University of Otago, Wellington
 - Undergraduate students at the Wellington campus do not send in this form – your photo will be taken on enrolment day.
 - Postgraduate and PhD students can either send in this completed form or, if you are on the Wellington campus, make an appointment with Ewen Coleman, tel 385 5864, email ewen.coleman@otago.ac.nz to have your photo taken.

All Wellington students except Summer School students must collect their ID Cards from the department Administrator for their course.

SECTION B: STUDENT DETAILS * Denotes compulsory fields. Please complete ALL the panels below using CAPITAL LETTERS:

Legal Surname/Family Name*	<input type="text"/>	Legal First/Given name(s)*	<input type="text"/>
Date of Birth*	<input type="text"/> <input type="text"/> <input type="text"/> 19 <input type="text"/> <input type="text"/>	User Name (if known)	<input type="text"/>
Address to send Card*	<input type="text"/>	ID number (if known)	<input type="text"/>
Postcode	<input type="text"/>	Telephone*	<input type="text"/>
Signature*	<input type="text"/>	Email	<input type="text"/>
		Date*	<input type="text"/>

SECTION C: Please select and complete one of the following options:

- I had a University of Otago Student ID card in 2016 and wish to use the same photo for my 2017 ID card. Note: returning distance students can apply online here <https://secure-www.otago.ac.nz/idcard/>**
Be mindful that if your appearance has altered noticeably, last year's photo may cause problems for you when photo and face-matching identity is required (e.g. during examinations).
Check 'Student Details' are completed correctly, signed and dated and return this form to the ID Card Office†
- I had a University of Otago Student ID card in 2016 and would like to use a new photo for my 2017 ID card.**
Attach a recent standard passport photo* Check Student Details are completed correctly, signed and dated, attach photo and return this form to the ID Card Office†
- I did not have a Student ID card in 2016. I have attached a recent standard certified passport photo***
You will need to ask someone you know who can identify you (acceptable forms of photo ID listed overleaf) and who meets the criteria, to complete the Witness Statement overleaf and to certify your passport photo.
Check Student Details are completed correctly, signed and dated.
Check Witness Statement is completed correctly, passport photo certified correctly.
Attach certified photo to this form and return to the ID Card Office†

*Attach a recent standard passport photo with a plain light coloured background – no holiday snaps or home printed photos please!

PLEASE NOTE

- **Photos must be processed at a Photo Lab or Pharmacy.**
- **Unsuitable or incorrectly witnessed photos will be returned.**
- **Do not staple over face as photo is used for ID card.**

†Please return this form to:
**ID Card Office
Information Services Building
University of Otago
PO Box 56
Dunedin 9054
New Zealand**

SECTION D: Complete only if the applicant did not have a Student ID card in 2016.

WITNESS STATEMENT

Please read the completed 'Student Details' and the witness requirements of this application carefully before completing this declaration.

The Witness will:

- Sight an original, acceptable form of photo ID from the list below, to confirm the applicant's identity.
- Complete the 'Witness Declaration' in their own handwriting, and
- In their own handwriting on the reverse of the photo, complete the sticker, or write 'Certified true likeness of <student's name>', sign and date it.

EXAMPLE
'Certified true likeness of <student's full name> _____ Signed _____ Date

A Witness must:

- Be one of the following: Authorised University of Otago employee, Lawyer, Registered Teacher, Minister of Religion, Police Officer, Kaumatua, Registered Medical Professional, Justice of the Peace, Applicant's Employer, and
- Be aged 18 years or over, and
- Have a daytime contact telephone number and be available during normal business hours

A Witness must not:

- Be a relative or part of the family group of the person named in this declaration, or
- Be a wife, husband, de facto, partner or civil union partner of the person named in this declaration, or
- Live at the same address as the person named in this declaration

WITNESS DETAILS

Which one of the following groups do you (the witness) belong to:

- | | | |
|---|--|--|
| <input type="radio"/> Authorised University of Otago employee | <input type="radio"/> Lawyer | <input type="radio"/> Registered Teacher |
| <input type="radio"/> Minister of Religion | <input type="radio"/> Police Officer | <input type="radio"/> Kaumatua |
| <input type="radio"/> Registered Medical Professional | <input type="radio"/> Justice of the Peace | <input type="radio"/> Applicant's Employer |

If you do not fit in any of the categories above, you CANNOT witness this application

One of the following four forms of photo identification must be sighted. Please tick which photo ID you have sighted to confirm the identity of the person named in this declaration.

- | | |
|--|--|
| <input type="radio"/> Passport | <input type="radio"/> 18+ Card |
| <input type="radio"/> New Zealand Driver's Licence | <input type="radio"/> New Zealand Firearms Licence |

Please note: If the student does not have one of the acceptable forms of identity as listed above the applicant will need to contact the ID Card Office for instructions on how to proceed: icard.officer@otago.ac.nz tel 64 3 479 5330.

Please complete the following:

Witness Surname/Family Name

Witness First/Given Name(s)

Name of Business

Phone/Cell:

Street address of Business

WITNESS DECLARATION:

I declare that:

Applicant's Surname/Family Name

Applicant's First/Given Name(s)

- is the person in the photo that I have named and that
- the information I have provided is, to the best of my knowledge, true, complete and correct, and in my own handwriting.

Witness Signature

Date

 | | 20 | |

Official Witness Stamp