
HARVARD UNIVERSITY ID CARD SERVICES

Temporary Photo ID Card Request (POI Role)

ALL required fields MUST be completed or this form will not be processed. Required Fields in BOLD. Campus Service Center: Fax (617) 496-8278; Email: <u>id_services@harvard.edu</u>; Telephone: (617) 496-7827.

1 - Individual Being Sponsored (Name and date of birth must match government issued ID)			
Start Date *	End Date * (not more than 15 months from start date)	Will the individual need access to a Financial or HR system? Yes No	
	11.6.2		Lmi
Has this individual been at Harvard before?		Residential Address	Telephone
☐ Do not know ☐ Yes, recently			
Yes, before 2003 Previous HUID if known:			
Last name	First name	Middle name	DOB (MM/DD/YYYY)
Email	Department	School or business unit	Company name (if external)
Role			
Consultant Contractor Vendor Security Family Tenant Other			
ID Card Required? Yes No			
Suggested wording on Card (15 character limit)			
2 - Sponsor's Information (administrator or faculty member, please print)			
Last name	First name	Harvard ID	Title
Department	School or business unit	Email	Phone
Requested by (if other than sponsor)			
Last name	First name	Email	Phone
3 - Sponsor			
By endorsing this individual for a sponsored identity, you are affirming that this person has a legitimate business, research or educational reason to obtain an HUID. You also agree to take responsibility for the accuracy of the information provided, for keeping the information on this individual up to date, and promptly notifying ID Card Services when the individual's affiliation with the University ends.			
Sponsor's Signature	Print n	ame	Date