

# **Dawn Career Institute - Replacement ID Badge Request Form**

Name: \_\_\_\_\_

Program: \_\_\_\_\_

Instructor: \_\_\_\_\_

Request Date: \_\_\_\_\_

**A \$5.00 replacement fee will be assessed for lost, stolen, or damaged cards. The fee must be collected at the time of request for the replacement badge.**

***For office use only:***

Fee Collected By: \_\_\_\_\_ Date: \_\_\_\_\_

Replacement Made By: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return form to Registrar after replacement badge has been given to the student