

Distance Education UTA ID Card Request

Name: _____ UTA ID#: _____

Please check your classification: Student (non-nursing) Graduate Nursing Other _____
 Nursing Fac\Staff Nursing

Please be sure to follow the instructions below:

1. **Have this form notarized**
2. **Email the following to idphoto@uta.edu (We need this to be sent from your mavs.uta.edu Email)**
 - a. Scan of this form, completed and notarized.
 - b. Scan of your government issued ID, such as driver's license or passport
 - c. Your photo to be used on your ID card (see below photo requirements)
3. **Photo Requirements for your ID: (visit www.uta.edu/distanceid for more information or examples)**
 - a. Photo file should be in .jpg format
 - b. File name should your full UTA 10 digit 100# (e.g. 1001234567.jpg)
 - c. Head and shoulder/face clearly visible/facing forward — no profile shots, sunglasses hats or hands
 - d. Photo needs to be in color, with a uniform white or light blue colored background
 - e. We only want to see you - No friends, pets or others in the photo with you
 - f. Graduation caps, gowns, or other costumes should not be worn
 - g. A scan of your driver's license photo cannot be used as your ID photo
4. **In the space provided below, please include the mailing address of where you would like your UTA ID card mailed. Address will need to match one of the addresses you have on file in MyMav.**

Sworn Statement:

I, _____, certify that the information provided above is correct to the best of my knowledge. I also certify that the attached copy of the government issued ID is a copy of my personal ID and that I am not making this request for another person. I also certify that the photo file I will send via email is a photo of me.

Signature

Notary information, signature, and seal.

State of _____ County of _____
Subscribed and sworn to before me on this _____ day of _____, 20____.

Notary Public
Commission Expiry Date: _____