



APPLICATION FOR ALUMNI ID CARD FORM

CIR-AAO-D-F-002

INSTRUCTIONS: Write legibly and readable using **BLOCK LETTERS**.

Last Name		First Name		Middle Name
Present Address				
Email Address				
Date of Birth	Gender	Citizenship	Civil Status	Contact Number
	☐ Male ☐ Female			
Please indicate the highest level of education you completed at National University by checking the appropriate box.		☐ Elementary ☐ College ☐ Junior High School ☐ Post-Graduate ☐ Senior High School ☐ Other		
Course/Degree			Year Graduated	
Current Employer			Position Title	
Company Address			Office Number	
Are you allowing NU Alumni Office to provide your contact details for possible alumni activities?				☐ Yes ☐ No
Are you allowing NU to provide your contact details to companies for possible employment?				☐ Yes ☐ No
Alumni Signature	Registrar Office	Accounting Office	ITSO	Alumni Affairs Office
	Course: _____ Batch: _____ _____ _____ Signature over printed name	OR #: _____ Date: _____ _____ _____ Signature over printed name	_____ _____ Printed Date _____ _____ Signature over printed name	_____ _____ Date Encoded _____ _____ Signature over printed name
By providing this information, you consent to its use by National University for alumni activities, potential employment opportunities, and statistical purposes. The information will be stored in compliance with the Data Privacy Act of 2012. You certify that the information provided is accurate and understand that you have the right to update your details as needed. When the information is no longer required, it will be disposed of according to official school procedures.				☐ I Agree _____ Signature over printed name

Procedure for Applying Alumni ID

1. Fill-up Alumni ID Card Application Form
2. Proceed to Alumni Affairs Office for validation
3. Proceed to Accounting Office for payment
4. Proceed to ITSO for ID Processing/Printing