



# Authorization for Collecting Student EdU Card

Hotline: 2948 6601

Fax: 2948 6520

**Notes:**

- (1) This form is only applicable to students who cannot collect the EdU Card in person.
- (2) The completed form should be returned to OCIO IT Help Desk by the Authorized person directly.
- (3) Please prepare the photocopy of student's HKID, true copy of Authorized person's HKID for verification.

## A. Authorization Details

Name : Prof/Dr/Mr/Mrs/Ms/Miss \_\_\_\_\_  
(Surname / Last Name) (Given Name / First Name)

Course ID : \_\_\_\_\_ Contact No. : \_\_\_\_\_ Student No. or Application No.: \_\_\_\_\_

I hereby authorize the following person to collect my EdU card:

Name: \_\_\_\_\_ HKID No.: 

X	X	X	X				(		)
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(Last 4 digits of HKID)

Student's Signature : \_\_\_\_\_

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

For Office Use Only	
EdU Card No. : _____	Verified the following document:
Ticket No. (If any) : _____	<input type="checkbox"/> Completed Application Form
Processed by : _____	<input type="checkbox"/> Photocopy of Student's HKID
	<input type="checkbox"/> True copy of Authorized Person's HKID

Collection of Student EdU Card	
Signature of Authorized Person	: _____
Name of Authorized Person	: _____
Date	: _____