



STUDENT INFORMATION			
Student Name:		Date:	
Program:		Track:	

AUTHENTICATION INFORMATION	
<p><b>Student Section:</b></p> <p>I attest that I am the person whose name is stated on this form and that I am requesting my student identification number.</p> <p>Print Name: _____</p> <p>Signature: _____</p> <p>Phone Number: _____</p>	<p><b>Directions:</b></p> <p><input type="checkbox"/> Print Form.</p> <p><input type="checkbox"/> Provide printed name.</p> <p><input type="checkbox"/> Provide signature.</p> <p><input type="checkbox"/> Provide phone number to contact you with your identification number.</p> <p><input type="checkbox"/> Fax 805.565.3804 or scan/email <a href="mailto:registrar@pacifica.edu">registrar@pacifica.edu</a> this form to the Registrar's Office.</p>

<p>This student identification form is intended as a method of last resort to authenticate student identity if a student does not know their Pacifica Student Identification Number or has lost their Pacifica Student Identification Card.</p> <p>The authentication process can take up to five business days.</p> <p>Revised 8/2019</p>	<p><b>Required Signature:</b></p> <p>_____ Registrar Date</p> <p><input type="checkbox"/> Confirmed Signature</p> <p><input type="checkbox"/> Contacted Student _____</p> <p>Student ID Number _____</p>
--	--