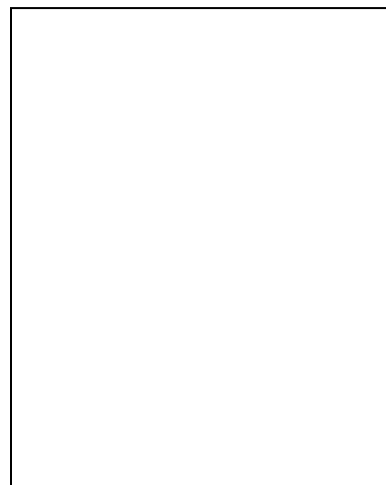# UWI ID APPLICATION FORM
FOR OPEN CAMPUS STUDENTS

**This form must be completed in the presence of
Site Coordinator/Distance Registry Representative
and submitted by said Coordinator**

NAME: _____ _____ _____
(Block letters)   **Surname**   **Middle**   **First**

STUDENT ID #: _____

PROGRAMME: _____

YEAR OF STUDY: _____

SIGNATURE OF STUDENT
**Please sign clearly within this
box and <u>NOT</u> on the lines**   →

CERTIFIED BY SITE COORDINATOR/DISTANCE REPRESENTATIVE _____

DATE _____

NB: Passport Photograph must be attached