

# ISIC Application

*Please print clearly in blue or black ink.*

I am applying for the...

- ISIC Basic (\$22)
- ISIC Premium (\$75)
- ITIC for Teachers (\$22)

Information about me...

Name

Institution you Attend (e.g. OSU)

Date of Birth: Day / Month/ Year

Campus Wide ID Number (CWID)

If there are questions regarding my card, please contact me at the following e-mail address...

I hereby certify that this information is true and understand that any false statements on my part may result in forfeiture of all card benefits.

Signature

Date

## **This space for office use only.**

- Cash
- Check
- Bursar

*Photos should  
be the size of  
this square with  
head filling the  
majority of the  
space.*

Return to ISIC Issuing Office:  
The OSU Study Abroad/NSE Office  
060 G Student Union 405.744.8569