

# HARVARD ID CARD PROXY FORM

To: Harvard University ID Card Office

I \_\_\_\_\_ of \_\_\_\_\_ hereby authorize  
(Cardholder Name) (School or Department)

\_\_\_\_\_ to exchange my current Harvard University ID card on my behalf.  
(Authorized Proxy Name)

I understand that the ID Card Office will only provide the above named individual with my new ID card upon:

1. the authorized individual presenting their own current, valid Harvard ID or their own current, valid ID from one of the affiliated hospitals;
2. the surrendering of my existing, valid Harvard ID; and
3. the providing of this signed authorization to the ID Card Office.

I also acknowledge that it is the sole responsibility of the person authorized above to return my new ID card to me in a prompt and timely manner.

\_\_\_\_\_  
Cardholder Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School/Department Approval (if required)

\_\_\_\_\_  
Date

## Proxy Acknowledgment (to be completed at time of card swap):

I acknowledge that I have received the ID Card for the above named cardholder and will return the card to the cardholder in a prompt and timely manner.

\_\_\_\_\_  
Proxy Signature Proxy's Name Printed Date