



APPLICATION FORM

REPLACEMENT OF CAMPUS CARD (For Bachelor's Degree Programmes)

FOR TREASURY SECTION USE ONLY

FOR REG USE ONLY

MOP100 received by: _____

Date: _____

The charge for replacement of
campus card is MOP100.

- ☐ Macau Pass at REG
☐ GovPay at REG

Name : _____

Student No.: □-□□-□□□□-□

NOTE

Student is required to present his/her personal I.D. card for verification.

❖ I declare that the information provided in this application form is correct and I have acknowledged and understood the following
<Personal Data Collection Statement of the Registry of the University of Macau> stated below:

The University of Macau, in accord to the purpose of providing the related administrative services requested by applicants, requires applicants to fill in this application form and submit to the Registry. The personal data collected in the form will only be used for the mentioned purpose and may also be transferred within the University and to entities that are in accordance with legal provision or with your prior consent, for the purpose of carrying out the related procedures. The transmission of personal information over the Internet may lack protection and security. There is a risk that your information may be accessed or used by an unauthorized third party.

The application will not be proceeded if applicants fail to fill in any of the mandatory fields as required in the application form in accord to the personal-identification and education-related information.

To make correction of your personal data held by the University or to apply for related testimonials, undergraduate students can submit the request to the Registry while postgraduate students should contact the Graduate School.

Applicant's Signature: _____

Date: _____



RECEIPT

Name : _____

Student No.: □-□□-□□□□-□

This is to acknowledge receipt of your application for replacement of student
campus card.

Payment

- ☐ Macau Pass at REG / TRE
☐ GovPay at REG / TRE
☐ Cash at TRE

Signature & Stamp

Date



FOR TREASURY SECTION USE ONLY

Student Name: _____

Student no.: □-□□-□□□□-□

Payment for replacement of campus card received by:

Payment

- ☐ Macau Pass at REG / TRE
☐ GovPay at REG / TRE
☐ Cash at TRE

Signature & Stamp

Date

AUTHORIZATION

I (Name) _____ (I.D. No _____) hereby authorize
(Name) _____ (I.D. No _____) to act on my behalf for
collection of the student campus card.

I declare that the information provided in this authorization is correct and I have acknowledged and understood the <Personal Data and
Collection Statement of the University of Macau/the Registry of the University of Macau>.

Signature: _____

Date: _____ / _____ / _____

Note: Please submit this authorization together with I.D. copies of both parties.
