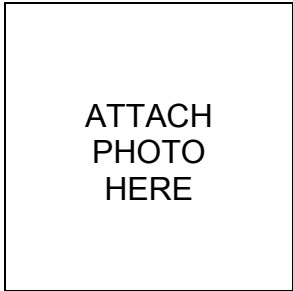




**UC international**  
 3134 Edwards One  
 PO Box 210640  
 Cincinnati, OH 45221-0640

**International Student ID Card (ISIC)**

- Emergency and travel insurance
- Widely recognized form of ID
- Many student travel discounts worldwide



Application must be submitted with:

- One passport sized photo (name printed in ink on the back)
- Payment
- Proof of student or faculty status as described in categories below
- Copy of driver's license, passport or birth certificate.

**Terms and conditions:**

**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.**

**Applicant's Signature**

**Date**

Card	Proof Requirements	Cost	Validity Period
ISIC (Student)	Photocopy of current school ID with academic year validity visible, OR School Declaration with school seal (see form below), OR photocopy of your transcript/report card for current academic year	\$22	Sept 1, - Dec 31 (Following year)
ITIC (Teacher)	Photocopy of your faculty ID (showing validity for current academic year) OR letter on school satisfactory from department chair, school principal OR other school official verifying faculty status or equivalent during the current academic year.	\$22	Sept 1, - Dec 31 (Following year)

\*Please read the instructions above before filling out your application. Type or print in clear block letters only.

Please indicate which card you are applying for:

- Student (ISIC)     Teacher (ITIC)

**Personal Information**

\_\_\_\_\_  
 Name (First, Last)

Payment \$22 Cash or Check

\_\_\_\_\_  
 Institution/School Name      Expected Grad date (MM/YY)

Please make checks payable to the University of Cincinnati.

\_\_\_\_\_  
 Date of birth (i.e. 09/Jun/82)      School Id#

I plan to travel to \_\_\_\_\_  
 (Country/Countries)

Address card mailed to: (U.S. Address only)      Valid \_\_\_\_\_

Is this for academic credit?  
 Yes     No

\_\_\_\_\_  
 Street      Apt#

Departure Date: \_\_\_\_\_  
 (Approximate)

\_\_\_\_\_  
 City      State      Zip

Return Date: \_\_\_\_\_  
 (Approximate)

\_\_\_\_\_  
 Telephone      Email Address

Permanent Address (If different from above)

\_\_\_\_\_  
 Street      Apt#

\_\_\_\_\_  
 City      State      Zip

OFFICE USE ONLY

Int'l ID Card # \_\_\_\_\_ Year \_\_\_\_\_