Date:	
Date:	

## **Cal 1 Card Authorization for Volunteers**

This serves as authorization to charge the ERSO MOU for the issuance of a Cal1 Card for the affiliate named below:

## To Be Filled Out By Volunteer:

Name:	
Affiliate ID Number:	
Academic Department:	
Effective Dates:	

## To Be Filled Out By RSO:

Faculty Host:			
Faculty Host Contact Information:			
Chartstring for Transfer of Charges:			
RSO Name:			
RSO Signature for Approval:			
Access Needed:	☐ Cory	☐ Davis	☐ Etcheverry
	☐ RFS	☐ SD Hall	☐ Soda