



THE AMERICAN UNIVERSITY OF IRAQ
SULAIMANI

Student ID Replacement Form

Student ID: _____

Student Name: _____

Requested Date: _____

Date Lost/Damaged: _____

Date Notified AUIS: _____

Program: _____

Penalty Fee: \$25.00 _____

Phone Number: _____

E-mail (AUIS): _____

Student Signature: _____ Date: _____

***Please allow a minimum of 4 working days to process, design, and print your ID.**

I have received my replacement ID and paid the required fee to the Finance Department.

Student Signature: _____ Date: _____

Registration and Records Office: _____ Date: _____