

## Collaborative Arts Middle School MetroCard Replacement Request

Return to: Main Office

Please note: If this form is not signed by the parent or guardian, it will be returned with no action taken. Students may pick up their metrocards in the Main Office at dismissal on Mondays, Wednesdays or Fridays. Metrocard replacements may take 5-7 days.

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Official Class

\_\_\_\_\_  
Date

\_\_\_\_\_  
Lost, stolen or damaged?

\_\_\_\_\_  
Full-fare or half-fare?

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Official Class Teacher

\_\_\_\_\_  
Room #

Student: Please explain (what happened, where, when) below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_

Office Use Only	
_____ Deactivated Card #	_____ Replacement Card #