

University Card Form

You must complete and return this form to confirm your intention to enrol at Oxford University. Once the University receives your form it will start the process of registering you as a student. The information you provide (including the photograph) will be collected and used in accordance with the University's [student privacy notice](#) and the General Data Protection Regulation (GDPR).

Details for University Registration and University Card

All names, in full, as they appear on your birth certificate/passport PLEASE PRINT LEGIBLY		
Last names:		
First names:		
Middle names:		
Date of birth	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	dd	mmm
		<input type="text"/> <input type="text"/>
		yy
(e.g. 23-Jan-XX)		
College or PPH (if applicable) ¹ :		
Course title (e.g. BA History):		
Start Date (please circle): Michaelmas [Oct] Hilary [Jan] Trinity [Apr] 20__ (year)		
Graduate students only:		
Tick box if your studies require access to manuscripts, early printed books (pre 1801) or other rare materials <input type="checkbox"/>		
Previously held cards		
Tick box if you have ever been issued with an Oxford University Card or a Bodleian reader's Card <input type="checkbox"/>		
Please give the old card number if you can:		

Passport-style/sized ² RECENT PHOTO Staple firmly BUT Do not obscure your face

SIGNED by the STUDENT (Hand written signature required)

Signature:

Undergraduates

Please return this form to your college.

Graduates

Please return this form by email to: acreturns@admin.ox.ac.uk

¹ A matriculated student is a student who is a member of a college or a permanent private hall.

² Your photo is used as a means of identification throughout the University. It is printed on your University Card and also stored digitally in record systems used by the University and Colleges, including the Student record system

FOR OFFICE USE STUDENT ID NO:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------