



Disclaimer: This form is for staff identity card processing **only**. It can not be used for other identification purposes.

**LAGOS STATE UNIVERSITY, LAGOS, NIGERIA
STAFF IDENTITY CARD
DATA FORM**

FILL IN CAPITAL LETTERS

USE **BLACK** INK ONLY

Please tick as appropriate

New request

Renewal

Replacement

PF NO:

BLOOD GROUP:

Surname:

First Name:

Other Names:

Sex:

Marital Status:

GSM No:

E-Mail Address:

Staff Category: Senior Junior (please tick as appropriate)

Grade Level: /

Designation:

Department/Unit:

School/Faculty:

Name of H.O.D.

Signature

Name of Deputy Registrar
(ASE / NASE & T)

Signature

1'X'
Passport photo
Passport photograph **must** be on a white background '**only**'.

Staff's Signature

For official use only

Batch No:

Scanned by: Time: Date:

Processed by: Time: Date:

Number of Renewal

Number of Replacement