

# ETSU CAMPUS ID SERVICES IMAGE REQUEST FORM

I would like to request my image from the ID System database file.  
My signature authorizes release of my image.

I authorize release of my image to the   
Department for use in ETSU publications.

I request that my image be sent to my ETSU e-mail account.

Please sign your name below:

Name (Please Print)

E Number

Date

Phone Number

Please allow 2-3 business days for processing.