



**RESIDENTIAL STUDENTS  
EAGLE CARD REPLACEMENT FORM**

Date

I, \_\_\_\_\_ authorize Eagle Card Services to charge my student account in the amount of \$25.00 for the replacement of my Coppin State University Identification Card that provides access to the residence halls and dining facilities.

I understand that the charge to my account is for the replacement of a card that is:

lost                      stolen                      damaged

Residence Hall and Room #

Student Signature:

Student ID#:

Student Email Address:

Student Phone Number: