

Student Photo Request Form



**College of
Veterinary Medicine**

UNIVERSITY OF ILLINOIS URBANA-CHAMPAIGN

University of Illinois at Urbana-Champaign
College of Veterinary Medicine
2001 South Lincoln Avenue, Urbana, IL 61802
vetmed.illinois.edu

Design Group @ Vet Med
VMBSB 2872-2878
designgroup@vetmed.illinois.edu
vetmed.illinois.edu/designgroup

ID Photo Hours:
Monday, 2:00 - 4:00 PM
Wednesday, 2:00 - 4:00 PM

ID Photo Location:
VMBSB 2873

To be completed by the person photographed

Information for ID Badge

Name: _____
FIRST LAST

Net ID: _____@illinois.edu Do you want your badge to include pronouns? Yes: _____
(If yes, please indicate.) No

Class of: _____

The image resulting from this request will appear on your College of Veterinary Medicine identification badge. The Office of Academic and Student Affairs will also include your photo as part of a class composite which is used for internal purposes.

Photo Authorization and Release

I further authorize the College of Veterinary Medicine to include my photo in the online directory on the CVM website. The college may also choose to use my photo in printed materials and publications, such as the annual report, departmental brochures, and other college-related publications.

Yes, my photo may be used on the CVM website and in CVM publications.

No, please do not use my photo for either purpose.

Authorizing Signature: _____ Date: _____

For Design Group Use:

Photo taken
Photo saved to server
ID badge printed

Photo uploaded to directory
Photo added to composite
Badge/composite billed

Completed by: _____ Completed on: _____