

STICKER APPLIED? ☐ YES ☐ NO

IF DENIED, DATE STUDENT NOTIFIED:

NSCC U-PASS OPT OUT / OPT IN REQUEST

_AST NAME: F	IRST NAME:
STUDENT #: C	CONTACT EMAIL:
ADDRESS:	
POSTAL CODE: T	ELEPHONE:
PLEASE SELECT EITHER OPT OUT OR OPT IN REQUEST AND REASON:	
☐ OPT OUT REQUEST: Please do not submit your U-Pass opt out request until you are registered in a program.	
This is a mandatory student service for full time students enrolled of the following opt out provisions. Please choose one option an	at metro/HRM campuses. Students must meet the conditions of one d provide necessary documentation (as required).
☐ I am officially withdrawing from NSCC prior to the advertised deadline for my program.	
☐ I am changing my student status from full time to part time prior to the official add/drop date for the term.	
☐ I am currently enrolled at one of NSCC's metro campuses however am studying fully online.	
☐ I currently hold a valid Access-a-Bus, CNIB, WIH or X-Pass transit pass. (Please include a photocopy of both sides of your current this form)	
☐ I currently reside outside of the Halifax Transit service area. (Please include current proof of residence such as a utility or other within the last month, lease or mortgage, home or tenants' insurance for your residence in your name.)	
☐ I have a medical concern that prevents me from taking transit. (Please include physician/medical practitioner's note)	
PLEASE NOTE: If you have already received your U-Pass sticker, your U-Pass sticker must be handed in to the Business Office before any opt out refund is placed on your student account (if applicable).	
☐ OPT IN REQUEST: Please do not submit your U-Pass opt in request until you are registered in a program. The ability to opt in to the U-Pass program is limited to full time students.	
☐ I am studying full time online through eCampus.	
☐ I am moving from part time to full time studies.	
nstructions: This form needs to be submitted annually and it is the student's responsibility to ensure that it is completed in full, includes ALL required supporting documentation and is submitted by the deadline. Additional information regarding U-Pass and submission deadlines can be found at www.nscc.ca/upass Completed forms and supporting documentation can be submitted to one of the following campus Business Offices (Akerley, IT or Ivany) via email. Please add the subject line UPASS and your student ID to your email. **akerley.info@nscc.ca** *vany.info@nscc.ca** T.Finance@nscc.ca** T.Finance@nscc.ca**	
FOR OFFICE USE ONLY DATE REQUEST RECEIVED: ACTIONED BY (Staff name):	
OPT OUT DECISION (Please indicate): ☐GRANTED ☐DENIED	
U-PASS RECEIVED FROM STUDENT?	□NO □ N/A (not previously issued)
	DESK TICKET TO ADD REVERSE FILED: YES NO
OPT IN DECISION (Please indicate): ☐GRANTED ☐DENIED	
U-PASS FEE COLLECTED?	

HELPDESK TICKET TO ADD FEE FILED: ☐YES ☐NO