SAINT PEDRO POVEDA COLLEGE

OFFICE OF THE REGISTRAR

CLAIM FORM FOR THE RFID

Please print, fill out, sign, and present this form to claim the RFID.

This is to acknowledge that I received the **correct RFID card** and **lanyard**
for School Year 2021 -2022 of

Name of Student: _____
SURNAME GIVEN NAME

Grade Level: _____

Claimed by: _____
SURNAME GIVEN NAME

Signature: _____ Relationship to the Student: _____

Date: _____ Time: _____

Data Privacy Notice

Use: The collected personal information is utilized solely for documentation purposes only.
Protection Measures:

- Only authorized POVEDA personnel have access to the given personal information.
- The personal data collected will be securely processed and stored in POVEDA.
- This form will be disposed of through shredding after the first semester of the school year 2021 - 2022.