



FANSHAWE STUDENT UNION
Winter 2017 Co-op BUS PASS OPT IN
2016-2017 APPLICATION FORM

To be completed by Student:

Please Print Neatly

Student Name: _____ Student #: _____

Program: _____

Email: _____

Student Signature: _____ Date: _____

To be completed by FSU Staff:

Fees Paid (\$113.00): (Cash, credit or debit)

Date: _____ Initials of Clerk: _____

Serial Number: _____