

Osher Lifelong Learning Institute & Rivers Run Instructions to request an RIT University ID

April 2023

1. Go to <https://start.rit.edu/IdentityRequest>
2. Select the reason you need a University ID (*Osher Lifelong Learning or Rivers Run*)
3. Enter personal email address
4. Enter preferred First Name and Last Name

University ID Request

Select the reason you need a University ID.

Reason

- ☐ Facilities Management Services
- ☐ Freelance Interpreter/Captionist
- ☐ Margaret's House
- ☒ Osher Lifelong Learning Institute
- ☐ Project Lead the Way Master Teacher
- ☐ RGH
- ☐ RIT Inn and Conference Center
- ☐ Rivers Run
- ☐ ROTC
- ☐ Temp/Contractor via agency (Datrose, etc.)
- ☐ Veterans Upward Bound
- ☐ Other RIT Affiliation

Your selection indicates that you are, or will soon be a Full Year Individual Osher student. If that is correct, please complete this form.

Personal email address

johnsmith@gmail.com

Confirm Personal email address

johnsmith@gmail.com

Preferred First Name

John

Last Name

Smith

Submit

5. Click Submit

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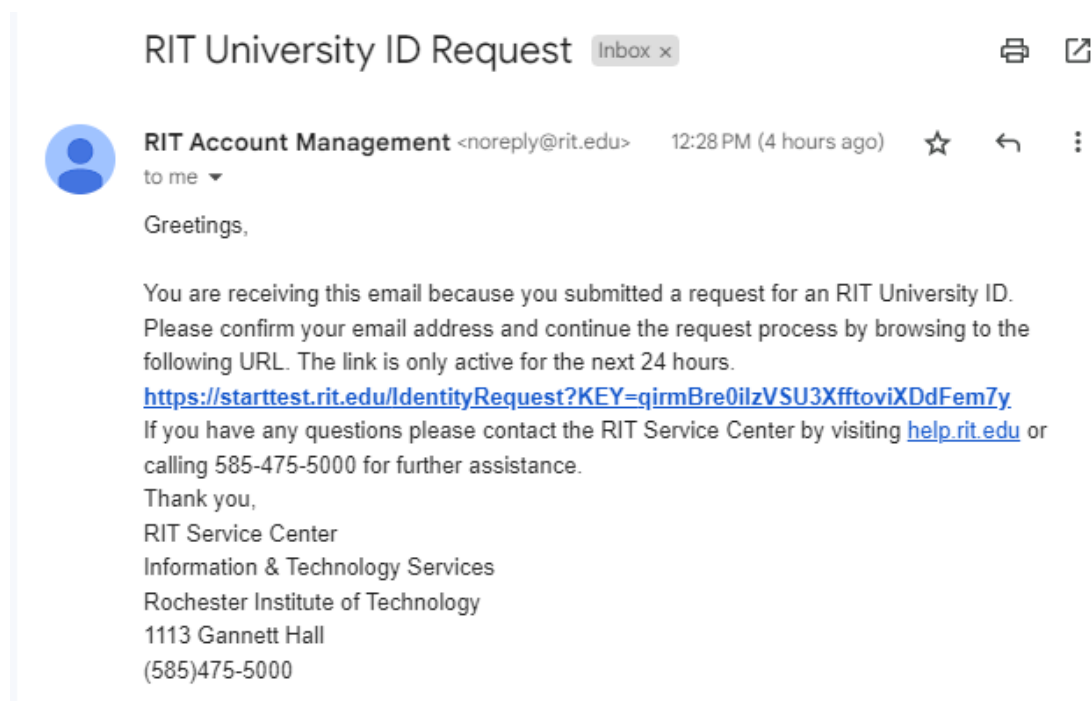
University ID Request Email Sent

Thank you for requesting an RIT University ID.

An email has been sent to the personal email address you provided. Please follow the link and instructions in the email to continue the University ID process. If you did not receive the email, please check your spam or junk folder.

If you have any questions please contact the RIT Service Center by visiting help.rit.edu or calling 585-475-5000 for further assistance.

6. An email containing a verification link is sent to the personal email address. *Note: The link is valid for 24-hours.*



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7. Follow the link to complete the optional data elements (*Legal First name, Middle Name, Suffix, address, DOB*) and validate the request.

University ID Request

Thank you for confirming your email address! Please fill out the form below.

By collecting your address and date of birth, RIT will be able to identify you as the owner of this University ID should you need assistance in the future.

Preferred First Name
Christine

Legal Last Name
Snell

Legal First Name

First Name

Middle Name

Middle Name

Suffix

Suffix

Street Address

Street Address

Street Address 2

Street Address

City

City

State



Zip Code

Zip Code

Country

USA

Email

csnell7178@gmail.com

Your Date of Birth (yyyy-mm-dd)

yyyy-mm-dd

✓ Create

8. Click Create
9. Presented with RIT UID
10. A service request ticket is automatically generated for the RIT Service Center to add an account type affiliation. The account sponsor will receive an approval request.

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Hi David!

Your approval is required for the following request.

Request Item Number: RITM0120665
Requested for: CLAWS ID Card
Item: Affiliation Assignment
Short description:

Request Details

External Email:
First Name:
Last Name:
UID:
Requested Affiliation Type: Temp/Contractor via agency (Datrose, etc.)
Sponsor Name:
Sponsor Email:

Additional Details

Reason for the approval: An approval was manually generated for this task

11. Once the approval is received, the RIT Service Center will add the affiliation.

12. Process complete