

# Business Card Order Form

Please Fill out electronically. If using Acrobat Reader, you must print out the form once you have filled it out. You will not be able to save the form with the added information.

Credentials should be listed in the following way: MD, DO and MBBS do not include periods. All other degrees should include periods. (Ex. Ph.D.; M.P.A.; M.B.A.)

Do not use periods with honors, credentials or certifications (Ex. FACS; APR; FAHRMM)

Department Name: \_\_\_\_\_

Date of Order: \_\_\_\_\_ Requested Delivery: \_\_\_\_\_ Quantity: \_\_\_\_\_

Email/Fax Proof To: \_\_\_\_\_

Deliver to Name: \_\_\_\_\_ Room and Building: \_\_\_\_\_

Card Design: (Check One) Card A  Card B  Card C  Card D  Card E

## Card Information:

Name & Credentials: \_\_\_\_\_

Title: \_\_\_\_\_

Department: \_\_\_\_\_

Location/Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

**A**

**Name, Credentials**  
Title Line 1  
Title Line 2  
Title Line 3

**Department Name**  
P.O. Box 1980,  
Norfolk VA 23501-1980

Office: 757/000-0000  
Fax: 757/000-0000

**UserName@odu.edu**  
**www.evms.edu**

Vertical, 1-color

**B**

**Name, Credentials**  
Title Line 1  
Title Line 2  
Title Line 3

**Department Name**  
P.O. Box 1980, Norfolk VA 23501

Office: 757/000-0000  
Fax: 757/000-0000

**UserName@odu.edu**  
**www.evms.edu**

Horizontal, version one, 1-color

**D**

**Name, Credentials**  
Title Line 1  
Title Line 2  
Title Line 3

**Department Name**  
P.O. Box 1980, Norfolk VA 23501-1980  
Office: 757/000-0000 | Fax: 757/000-0000  
UserName@odu.edu | www.evms.edu

Horizontal, version two, 1-color

**C**

**Name, Credentials**  
Title Line 1  
Title Line 2  
Title Line 3

**Department Name**  
P.O. Box 1980,  
Norfolk VA 23501-1980

Office: 757/000-0000  
Fax: 757/000-0000

**UserName@odu.edu**  
**www.evms.edu**

Horizontal, version one, 2-color

**E**

**Name, Credentials**  
Title Line 1  
Title Line 2  
Title Line 3

**Department Name**  
P.O. Box 1980, Norfolk VA 23501-1980  
Office: 757/000-0000 | Fax: 757/000-0000  
UserName@odu.edu | www.evms.edu

Horizontal, version two, 2-color