

Change of Student Information

Update your official University records by completing all information in section 1 as well as either section a, b, c, and/or d. Due to a variety of family situations, EACH parent/guardian updating the address on this form, needs to sign.

1 STUDENT NAME (REQUIRED FOR ALL CHANGES): _____

CLASS YEAR: _____ SMC#: _____

STUDENT ID: _____ OR DATE OF BIRTH: _____

NEW ADDRESS: _____

NEW HOME #: (_____) _____ NEW CELL #: (_____) _____

STUDENT SIGNATURE: _____ **DATE:** _____

a PARENT ADDR CHANGE (Requires PARENT signature)

PARENT/GUARDIAN NAME 1:

NEW ADDRESS: _____

NEW HOME #: (_____) _____

NEW CELL #: (_____) _____

HOME EMAIL: _____

WORK EMAIL: _____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____

b PARENT ADDR CHANGE (Requires PARENT signature)

PARENT/GUARDIAN NAME 2:

NEW ADDRESS: _____

NEW HOME #: (_____) _____

NEW CELL #: (_____) _____

HOME EMAIL: _____

WORK EMAIL: _____

PARENT/GUARDIAN SIGNATURE: _____

DATE: _____

c NAME AND/OR GENDER CHANGE: (Attach a copy of government issued photo ID AND either: court document, marriage certificate or SSN card reflecting the change.)

FORMER NAME: _____

NEW NAME: _____

PREFERRED NAME/NICKNAME (NO DOCUMENTATION NEEDED):

REQUESTING A GENDER CHANGE WITH THE ATTACHED DOCUMENTATION? YES NO

d SOCIAL SECURITY # CHANGE: (Attach a copy of social security card & government issued photo id.)

FORMER SOCIAL SECURITY#: _____ - _____ - _____. MUST ACCOMPANY ALL SSN CHANGES.

NEW SOCIAL SECURITY#: _____ - _____ - _____