

Change of Bio-Demographic Information Form

Leg	gal Name on Official Record (Firs	Student ID	
Cur	rrent Program & Specialization (i	Phone	
Cur	rrent Address	University Email	
Plea	ase complete the relevant section(s)	below and return the form and sup	oporting documentation to the Office of the Registrar.
	including a civil-issued birth ce	tificate, marriage license, divo tizenship certificate, state issue	n includes: government issued form of identification rce decree, social security card, passport, alien regis- ed license or identification, or court order. Documents
	Last Name	First Name	Middle Name
	changes their name and it has the Registrar, then they can req	peen fully processed and updat uest for their email address to	nt given to them upon enrollment. If a student legally red in the student information system by the Office of be updated/changed to reflect their new legal name.
	Please indicate your legal name	e to be used in your university	email address:
	Last Name	First Name	Middle Name
			he students' information is either self-reported in the mentation. Occasional errors occur, and corrections
			ocurate date of birth below. An original or notarized ed documentation of the date of birth.
	Correct date of birth:		
		umentation including the soci	documentation includes a new social security card al security number. Documents must be original or

	citizenship/residency status updates or corrections: Acceptable documentation includes residency card, passport and/or naturalization papers and a valid driver's license or other government-issue photo identification. Documents must be original or notarized copies of the original.					
	Citizen	Elig	ible non-citizen	-	Non-citizen	
	ETHNICITY CORRECTION: Check one:	Ethnicity is self-report	ed. No documer	ntation is necessary.		
[Non-resident alien					
	American Indian or Alaskan Native					
	Asian					
	Black or African American					
[Hispanic or Latino Native Hawaiian or Pacific Islander					
[
	White/Non-Hispanic					
	Two or more races					
	Race and ethnicity unkr	nown				
By signing	g below, I certify that all info	rmation presented on	this form is true	e and correct.		
Signature				Date		
	e use only g below, I certify that all info s Office	rmation presented on	this form is true	e and correct.		
Date Processed			Date Student N	Notified		