

PERSONAL DATA CHANGE REQUEST FORM

ease check all that apply: Current Stude		Student	F1 Student	
lame:			МІ	
Email:				
ADDRESS/TELEPHONE # CHANGE: Check all that apply:	Home	Mailing	Billing	Permanen
House #/Street				Apt. #
City St Telephone: Home Wor	State Work C		Zip Code	
tuition charges will be updated to reflect an out—o on a visa, your permanent residence must remain SOCIAL SECURITY NUMBER: MUST provide state/government issued Photo I.D. Incorrect Social Security Number	and a copy of	untry.		
NAME CHANGE/CORRECTION: MUST pro		rnment issued P	hoto I.D. and o	one of the following
1. A copy of your original naturalization papers 2. A copy of your certified copy of a court orde 3. A copy of your original marriage certificate of 4. A copy of your original birth certificate	s (Certificate an	d Court Order) e change of na		
Complete <u>FORMER</u> Name (Please print)	C	Complete <u>NEW</u> Name (Please print)		
Student's Signature	 Date			
UPDATE DATE OF BIRTH: MUST provide	e a copy of offic	cial birth certific	cate or copy o	of passport.
Incorrect date on CUNYfirst record: Correct date:				
Correct date:	FFICE USE			