

STUDENT PERSONAL INFORMATION CHANGE FORM

This form is to be used to correct or change your personal information on your Radford University records. Carefully read the instructions and information regarding documentary evidence below.

INSTRUCTIONS:

- All students are required to complete **Sections 1 and 2**.
- For a correction or change of name complete **Section 3**.
- For a correction of date of birth details complete **Section 4**.
- For a correction or change of gender complete Section 5.
- For a correction or change of Social Security Number **Section 6**.
- Sign and return to the Registrar's Office with documentary evidence as described below.

DOCUMENTARY EVIDENCE				
You <u>MUST</u> attach documentary evidence supporting your reque If you are applying for a full name change after legally changing your name OR after marriage or divorce, evidence must be:	Government Issued Photo ID along with: Offer and the second provide the second provided p			
If you are applying for a correction to date of birth, minor name change, addition of middle name, or a spelling correction, evidence must be:	Government Issued Photo ID, orPassport			
If you are applying for a correction of gender record, evidence must be:	Government Issued Photo ID, orBirth Certificate along with Photo ID			
If you are applying for a change of gender record, evidence must be:	 Government Issued Photo ID along with: ° Physician's Affirmation Document 			
If you are requesting to change your social security number, evidence must be:	 Government Issued Photo ID along with: Social Security Card 			
SECTION 1: PERSONAL INFORMATION				
Current Full Name:				
(First)	(Middle) (Last)			
Student ID # :				
Telephone Number :				
Email Address :				
SECTION 2: TYPE OF PERSONAL INFORMATION CHANGE				
Legal Name Change Correction of University Records	Change of Gender Social Security Number Change			



SECTION 3: CORRECTION OR CHANGE OF NAME				
Previous / Incorrect Name:	(First)	(Middle)	(Last)	
New / Correct Name:	(First)	(Middle)	(Last)	
Request Username Change:	Yes* No	0		
*Username change requests will to coordinate this change.	be forwarded to Identit	y Management in the Division of Information Te	echnology. Their office will be in contact with you	
SECTION 4: CORRECTIO	ON OF DATE OF BI	RTH		
	·	n Radford University records please indicate y	/our correct date of birth below:	
SECTION 5: CORRECTIO	ON OR CHANGE OF	GENDER		
If you have changed your gend GENDER: MALE	der or your gender has] FEMALE	been incorrectly recorded on Radford Unive	ersity records please indicate your gender below:	
SECTION 6: CORRECTION OF OR CHANGE OF SOCIAL SECURITY NUMBER				
If your Social Security Number Security Number below:	has changed or has b	een incorrectly recorded on Radford Universi	ity records please indicate your correct Social	
Social Security Number:			-	
DECLARATION				
I certify that all information, in	cluding documentary e	evidence is correct.		
STUDENT SIGNATURE:			DATE:	