

Change of Student Information Form

REQUIRED STUDENT INFORMATION

CLEARLY PRINT ONLY INFORMATION TO BE CHANGED. YOU MUST INCLUDE YOUR SIGNATURE.

EMERGENCY CONTACT INFORMATION MUST BE CHANGED ONLINE VIA CAMPUSNET.

Name:	CSU ID#	# :	
LEGAL NAME CHANGE (Preferred names must be	changed online via Campu	ısNet.)	
Note: Name and birth date changes must be accompai Acceptable legal documents include a marriage license			
New Legal Name:			_
Previous Legal Name:			
Birth Date:			
Reason for Change: \square Misspelled $\ \square$ Marriage $\ \square$ Le	gal \square Divorce \square Other: _		
SOCIAL SECURITY NUMBER CHANGE Note: Copy of y	our social security card MUST b	pe submitted with form to correct or provide]
Social Security Number:			1
ADDRESS CHANGE DOMESTIC ADDRESSES CAN BE UPDA	ATED ONLINE VIA CAMPUSNET		
Check Address Type:	☐ Other:		
Address Line 1:			
Address Line 2:			
Address Line 3:			
City:	State:	Zip:	
County (if Ohio) or Country:		_	
Other Information:			
Phone Type: Mobile Home Other:	Phone #:		
Signature (Required):		Date:	
Signature (Required):Take this form to C	ampus411 All-in-1 at MC 116 for n	rocessing	_

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