

Request for Student Information Change

Office of the Registrar 4th Floor, Dewar Union Hartwick College Oneonta, NY 13820 Tel: 607-431-4460; Fax: 607-431-4260

Please bring completed, signed form with a picture ID to the Office of the Registrar for processing.

Current Information

Last Name

First Name

Box#

MI

Student ID Number

Daytime Phone Number

Change of Address/Phone

Please check the address type(s) you wish to change:

[] Permanent: Unless otherwise specified this is where general information and bills will be mailed.

| [] | Local/Off-Camp | us: Off-campus a | address (Residential | l Life approval rec | quired to live | off-campus). |
|----|----------------|------------------|----------------------|---------------------|----------------|--------------|

[] Billing: If you want bills sent to an address other than your permanent home address.

New address:

| Address | | | | | | | | |
|---------|-------|-----|-------------------------|--|--|--|--|--|
| City | State | Zip | Country (if applicable) | | | | | |

New Permanent Home or Cell Phone:

Phone Number (include area code)

Change of Name

When submitting a request for a change of name the appropriate supporting documentation must accompany the request. Appropriate supporting documentation is granted by governmental agencies. Documents typically include but are not limited to marriage licenses, legal name changes, passports, or divorce degrees. List your new official name below:

Last Name

First Name

MI

Change of Social Security Number (SSN)

You must provide your original social security card and a photo ID for verification of this request. List your new SSN below:

New Social Security Number

Signature and Date

I hereby request any and all of the above changes (this form will not be processed without your signature).