



# EASTERN CONNECTICUT STATE UNIVERSITY

## Change Personal Information

(Submit to Registrar's Office once completed)

Current Name: \_\_\_\_\_  
Last First Middle

Eastern ID (or Last Four Digits of SSN): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number (to verify information if faxed): \_\_\_\_\_

I do hereby request the Office of the Registrar make the following correction(s) to my personal information:

Information to Change	Change to:
Name*	
Permanent Address	
Telephone Number	
Social Security Number	
Date of Birth	
Legal Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>

**\*If changing legal name and would like to have your student email address updated to reflect the change, please include a personal email for ITS: \_\_\_\_\_**

Please provide appropriate documentation to support the information change:

Name*	Official legal documents outlining the change (Marriage Certificate, Birth Certificate, SS Card, Court Documentation, etc.)
Permanent Address	Proof of new address with your name (such as a utility bill, driver's license, etc.)
Telephone Number	Proof of new phone number on phone bill.
Social Security Number	Social Security Card or Tax Documentation (Faxing is highly encouraged)
Date of Birth	Legal document with correct Date of Birth (such as driver's license, birth certificate, etc.)
Legal Sex	Legal documentation indicating change of sex (Court Documentation, Updated Driver's License, etc.)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For Office Use Only:**

Received Date: \_\_\_\_\_ Received By: \_\_\_\_\_

Admissions Notified \_\_\_\_\_

Financial Aid/Student Employment (Name or Address): \_\_\_\_\_