



Change of Name/Address Form

Student Information

First Name _____ Last Name _____ ID# 0000 _____

Personal Email Address (required for name changes) _____

Undergraduate Program Graduate Program

** If you receive financial aid, your name must match what is on your social security card.**

Student Signature/Date _____

Change of Name

Name changes require legal documentation (ie: a copy of your social security card, current driver's license, current passport, marriage license, etc.). We will notify you (via personal e-mail) when your name has been changed in the system.

Reason for Change: Name spelled incorrectly Change in Marital Status
 Other (please explain) _____

Former Name (as listed in CSE computer system) _____

New Name: First _____
Middle _____
Last _____

Change of Address/Phone

Permanent Address can not be changed to CSE campus address.

Address (effective date: _____)
New Address _____

Phone Number:
New Home Phone Number _____
New Cell Phone Number _____

Registrar's Office _____ Date _____

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