



## Change/Correction of Name, DOB, or SSN (Return to Student Affairs)

### NEW/Corrected Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

### Former / Incorrect Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Student ID# \_\_\_\_\_ Current Phone Number \_\_\_\_\_

- I hereby request that Edison State Community College use the current name indicated below for my college records and to cross-index all records pertaining to me.
- I understand that my Edison State email and Blackboard accounts will not be updated until approximately 2 weeks after the end of the semester, insuring that my important data and documents will not be lost during the current semester.
- I will be notified when my Edison State email and Blackboard accounts are officially changed and directed how to access my new accounts.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

### Complete the appropriate section below and provide the required documentation.

**Name Correction** (If the name in the system has been misspelled)  
Change requires a current photo ID with your full name, such as a driver's license, state ID card, or passport

**Legal Name Change**  
You must provide three pieces of documentation:  
1) a current photo ID, such as a driver's license, state ID card, or Passport, showing your new name  
2) your Social Security Card, showing your new name  
3) a copy of the legal court documentation showing the approved name change (for example, marriage license, divorce decree)

**Date of Birth Correction**  
Change requires a current photo ID with your full name, such as a driver's license, state ID card, or passport, showing your date of birth

Incorrect Date of Birth \_\_\_\_\_  
Month | Day | Year

Correct Date of Birth \_\_\_\_\_  
Month | Day | Year

**Social Security Number Correction**  
You must provide two pieces of documentation:  
1) a current photo ID, such as a driver's license, state ID card, or Passport  
2) your Social Security Card

Incorrect SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Correct SSN \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

For Office Use: **Documentation must be attached!**

RCNAMECH entered in CRI \_\_\_\_\_

Processed in NAE by: \_\_\_\_\_

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

Date Stamp