CUNY Baccalaureate Unique and Interdisciplinary Studies

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CHANGE OF DATA

INFORMATION ON RECORD

NAME as it appears _____
on CUNY records Last First MI

BANNER ID NUMBER _____

REQUEST FOR CHANGE

CHANGE OF NAME _____
Last First MI

CHANGE DUE TO ☐ Marriage ☐ Divorce ☐ Other _____
Submit a copy of your marriage certificate, divorce decree, original birth certificate, or original court order with county clerk certification with this form. A copy of original documents will be made for your records.

CHANGE OF ADDRESS_____ _____
Street Apt.

_____ _____ _____
City State ZIP

CHANGE OF TELEPHONE NUMBER_____

CHANGE OF E-MAIL ADDRESS_____

CHANGE OF BIRTH DATE_____
Present your original birth certificate to the Registrar's Office. A copy will be made for your records.

CHANGE OF SOCIAL SECURITY NUMBER_____
Present your original Social Security card to the Registrar's Office. A copy will be made for your records.

SIGNATURE Please sign and date this form. No changes can be made without your signature.

_____ _____
Signature Date

PLEASE NOTE that you should also make these changes with your HOME COLLEGE; we cannot do that for you.