

Student Name: \_\_\_\_\_ ID: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

Directions: This form is used to update your Name, Address or Social Security Number. Please print and complete all information. Requests must be accompanied by supporting documentation and may be faxed, emailed or delivered in person.

**Name Change**

Documentation: \_\_\_\_\_ Marriage Certificate \_\_\_\_\_ Official Name Change Documentation

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

New Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

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

**Address Change**

No Documentation is required. If you are changing the address for in-state tuition purposes, please refer to the University of Baltimore Residency Policies on the UB web site.

Address to be changed: \_\_\_\_\_ Local (local is also your mailing address) \_\_\_\_\_ Permanent

Current Address: Street, City, State and Zip Code

\_\_\_\_\_

New Address: Street, City, State and Zip Code

\_\_\_\_\_

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

**Social Security Number**

Documentation: \_\_\_\_\_ Social Security Card

Reason for change: \_\_\_\_\_

Current Number: \_\_\_\_\_ Updated Number: \_\_\_\_\_

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

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