

Form can be mailed to: **Academic Records, 5150 N. Maple Ave., M/S JA57, Fresno, CA 93740**
(no faxes accepted)

IMPORTANT NOTE: If you are a current employee at Fresno State, please visit Human Resources/Payroll, Joyal Room 211 in-person.

Name: _____
Last First Middle

Student ID #: _____ Phone Number: _____

Student Signature: _____ Date: _____

Complete *only* box(es) you wish to change

Legal Name Change **MUST Attach Copy of Drivers License and Social Security Card or Passport** *(Primary and preferred name will be updated)*

Name as shown on file: _____
Last First Middle

New Legal name (as shown on SSN or Passport): _____
Last First Middle

Social Security Number **MUST Attach Copy of Drivers License or Passport and Social Security Card or ITIN letter**

_____ Current Number
Number on File As Shown on Social Security Card or ITIN letter

Birthdate **MUST Attach Copy of Drivers License or Passport**

_____ As Shown on Current Drivers License or Passport
Date of Birth on File

Gender **MUST Attach Copy of Drivers License or Passport**

Male Female Male Female
Gender on File As Shown on Current Drivers License or Passport

Office Use Only

Last Enrolled: _____ Checklist: _____

Updated By: _____ Date: _____