

## **Personal Data Change Form**

Office of the Registrar

This form cannot be used by current or former CSUEB employees.

## Instructions:

- 1. Non-CSUEB employees should complete form, indicating type of change requested (Change of Name, DOB, SSN, or Gender).
- 2. Submit completed/signed form with a copy of legal documentation in one of the following ways: Email to <a href="mailto:reg@csueastbay.edu">reg@csueastbay.edu</a>; In person to Enrollment Information Center in the SA Bldg (Hayward); Fax to the Office of the Registrar at 510.885.3816.

Student Name:		Net ID:
Horizon E-Mail Address:	Phone Number:	
Are you a Current or former CSUEB Emplo	oyee? This includes Federal Work St	udy Student, Student Assistant, Teacher Aid,
☐ YES – PLEASE STOP! You mu	ust visit the Payroll Office to change y	our personal information.
$\square$ <b>NO</b> - Please complete form and	d submit to the Office of the Registrar	r per instructions above.
cites the new information which you on Name changes will be made to you	u would like to appear on your official your university record. has been processed, please contact the servicedesk	rriage license, driver's license, or passport which academic record. Service Desk to change your Horizon E-Mail address
Last	First	Middle
Print New Name: Name as it will appear on y	our University record.	
Last	First	Middle
SSN or ITIN CHANGE Change SSN	opy of drivers' license, passport, or b	oirth certificate for verification.
		a copy of a social security card or social appear on your official academic record.
which cites the new information which	opy of legal documentation, such as the you would like to appear on your off eir pronoun (he/she/they) that appears or	court document, driver's license, or passport
Required: My signature below confirms I a	am requesting the above change to m	ny official academic record at CSUEB.
Student Signature	Da	ate
For Office Use Only: ☐ Not Approved	☐ Approved Processed by:	Date: