MINNESOTA STATE UNIVERSITY MANKATO

PERSONAL DATA CHANGE FORM

Request Date _____

In order for any of the changes to be processed, please fill in the following information as it is currently in our student record system.

_____ last name
_____ first name
_____ middle name

_____ signature
_____ Tech ID
_____ birth date

NAME CHANGE

Must provide legal proof of your name change.

Please attach a copy of one of the following: picture ID (driver's license, passport), marriage decree, divorce decree, court order, certificate of U.S. citizenship. If you are receiving financial aid, we also need a copy of both sides of your signed social security card.

From: _____ last _____ first _____ middle _____ maiden

To: _____ last _____ first _____ middle

❒ Check to have this also be the name printed on your diploma.

Gender:
❒ Male
❒ Female

Marital Status: ❒ Single ❒ Married ❒ Divorced

Are you currently receiving Financial Aid? ❒ Yes ❒ No

Are you an international student on a F-1 or J-1 visa? ❒ Yes ❒ No

SOCIAL SECURITY NUMBER CHANGE

Attach a copy of both sides of your signed social security card to this form.

From: ___ – ___ – _____

To: ___ – ___ – _____

Many colleges/universities use social security numbers and birthdates for student identification purposes on student records. Providing this information is voluntary. If you do not provide these numbers, your application will not be processed. This data is requested for purposes of administration.

Return this completed form to the Office of the Registrar, WA 132.

A member of the Minnesota State Colleges and Universities System and an Affirmative Action/Equal Opportunity University.
This document is available in alternative format to individuals with disabilities by calling the Office of the Registrar at 507-389-6266 (V), 800-627-3529 or 711 (MRS/TTY).

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