University of Alaska
Change Form

MAU/Major Administrative Unit (circle one) UAA UAF UAS SW	Department
Last Name First M.	
Social Security Number/Student ID	Date of Birth _ _/_ _/_ _ mm dd yy

Indicate all areas to change:

❑ Student Related ❑ Vendor Related

❑ Employee Related ❑ Other _____

Address:

Is this a new address? ❑ Yes* ❑ No

* Changes to Employee-related address will affect mailing of pay statement and W2.

Mailing Address: _____

_____

City: _____

State: _____ Zip: _____ - _____

Phone: ( ) _____ Type: _____

Phone: ( ) _____ Type: _____

Please print clearly

❑ Check here if phone number is for hard copy file records only - not to be entered on the Banner system.

❑ If permanent student address has changed, check here and indicate changes on the back of this form.

Indicate Changes:

❑ Name

A name on official records at the University must be the full legal name. A change of name request MUST be supported by legal documentation, i.e., Social Security card (required for employee-related changes), marriage certificate, dissolution or divorce decree, a court order, or a driver's license.

New Name: _____ (Last First M.)

Old Name(s): _____ (Last First M.)

_____ (Last First M.)

❑ Identification Number

Correct ID: _____ - ____ - _____

Old (incorrect) ID: _____ - ____ - _____

Old (incorrect) ID: _____ - ____ - _____

A Social Security number is used as an identification number for University records. Changes or corrections to Social Security numbers require a copy of the Social Security card. Students who do not wish to use their Social Security number may request an assigned identification number. (Applies only if no employment or financial aid records exist.)

❑ Marital Status

❑ Single (S) ❑ Married (M) ❑ Divorced (D) ❑ Separated (P) ❑ Widowed (W)

Signature: _____ **Date:** _____

Required for all changes

For University of Alaska office use only

DEPT:	TYPE:	ENTERED BY:	DATE:	FORWARDED TO:
Human Resources	HR			
Student				
Vendor				