



# FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY

College of Law Registrar's Office

201 Beggs Avenue

Orlando, FL 323801

Office: (407) 254-3279 Fax: (407) 254 -3221 Email: [COLRegistrar@famu.edu](mailto:COLRegistrar@famu.edu)

## CHANGE OF PERSONAL INFORMATION FORM

**PLEASE TYPE OR CLEARLY PRINT IN THE FOLLOWING INFORMATION**

<input type="checkbox"/>	Spring	20
<input type="checkbox"/>	Summer	
<input type="checkbox"/>	Fall	

CURRENT TERM

FAMU STUDENT ID# \_\_\_\_\_

### CURRENT INFORMATION ON UNIVERSITY ADMISSION RECORDS

LAST NAME - -	FIRST NAME - -	MIDDLE NAME
SOCIAL SECURITY NUMBER - - -	DATE OF BIRTH (ex. 03-28-1985)	FEMALE <input type="checkbox"/> MALE <input type="checkbox"/>

CHANGE / CORRECT NAME ON UNIVERSITY RECORD TO:

LAST NAME	FIRST NAME	MIDDLE NAME
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CHECK BOX OF ATTACHED DOCUMENTATION	<input type="checkbox"/> COURT ORDER MARRIAGE LICENSE	<input type="checkbox"/> DIVORCE DECREE BIRTH CERTIFICATE	<input type="checkbox"/> NATURALIZATION PAPERS Drivers License / Photo ID Card
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CHANGE / CORRECT SOCIAL SECURITY NUMBER (Attach a copy of your new/correct card with photo ID)

INCORRECT NUMBER - - -	TO	CORRECT NUMBER - - -	<input type="checkbox"/>
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STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

For Official Use Only

REQUEST: APPROVED  DENIED

COMMENT(S) OR REASON(S) DENIED: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AUTHORIZED OFFICAL SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_