



# REQUEST FOR CHANGE OF BIO-DEMOGRAPHIC DATA UNDERGRADUATE GRADUATE DUAL PROFESSIONAL

OFFICE OF THE REGISTRAR • LIU POST • 720 NORTHERN BLVD., BROOKVILLE, N.Y. 11548  
(516) 299-2588 • WWW.LIU.EDU/POST/REGISTRAR

STUDENT ID or SOCIAL SECURITY#

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NATIONAL ID#

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NAME ON SCHOOL RECORD: \_\_\_\_\_

MAJOR/ACADEMIC PLAN: \_\_\_\_\_

LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

### INSTRUCTIONS:

- Print all information in block letters using upper/lower case and correct spacing.
- Complete only those items that are being changed.
- For change of Social Security Number, you must present an original social security card or an original/official letter from Social Security in person at the Registrar's Office. Alternatively, a notarized copy of the original, with the notary stating the original document was viewed/copied may be submitted
- For change of name, date of birth or gender, you must either present original documents at the office of the registrar (e.g. birth certificate, a marriage license, divorce decree) or a notarized copy of the original, with the notary stating the original document was viewed/copied. Transcript documents will not be updated with a new name after a degree has been conferred.

NEW FIRST NAME:

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NEW MIDDLE NAME:

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NEW LAST NAME:

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NEW DATE OF BIRTH; \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ NEW NATIONAL ID# \_\_\_\_\_

NEW ADDRESS: (CIRCLE ONE – PERMANENT OR PREFERRED STREET) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

### NEW TELEPHONE NUMBERS:

	INTERNATIONAL COUNTRY CODE	AREA CODE	PHONE NUMBER									
<input type="checkbox"/> HOME	<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>				<table border="1"><tr><td></td><td></td><td></td></tr></table>			
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SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### FOR OFFICE USE ONLY

AUTHORITY FOR CHANGE: BIRTH CERTIFICATE MARRIAGE CERTIFICATE DIVORCE DECREE COURT ORDER  
COMPUTER RESUMPTION OF SOCIAL SECURITY ENTRY ERROR MAIDEN FOR CHANGE OF NATIONAL

ID OTHER \_\_\_\_\_

ORIGINAL SEEN BY \_\_\_\_\_ DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ MAINFRAME \_\_\_\_\_ DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ PEOPLESFT \_\_\_\_\_ DATE \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_