



Admissions and Records

2400 W Bradley Ave
Champaign, IL 61821
Phone (217)351-2482
Fax (217)353-2640

Request for Name and/or Social Security Number Change

(Print and mail or fax to the address above)

Student Name _____

SSN/Student ID# _____

Date of Birth _____

Personal Email _____

Name Change

Legal Documentation required – Marriage Certificate, a Court Order, or a Dissolution Decree certifying the name change and photo ID

Please print **previous** First, Middle, Last Name

Please print **new** First, Middle, Last Name

Social Security Number Change

Documentation required – copy of Social Security Card and photo ID

Please print **previous** Social Security Number

Please print **new** Social Security Number

Student Signature _____ Date _____

Due to the danger of identity theft, persons who wish to change their name must provide a copy of their marriage license, a court order, or a dissolution decree certifying their name change. If your social security number is incorrect you must provide a signed social security card as well as a photo ID. Please send a photo copy of one of these documents, a copy of a photo ID and this form completed in person, by mail or fax.