Request for Student Information Change

Office of Advising & Registration
4th Floor, Dewar Union
Hartwick College
Oneonta, NY 13820
Tel: 607-431-4460; Fax: 607-431-4260

Please bring completed, signed form with a picture ID to the Office of Advising and Registration for processing.

Current Information

Last Name _____ First Name _____ MI _____

Student ID Number _____ Daytime Phone Number _____ Box# _____

Change of Address/Phone

Please check the address type(s) you wish to change:

[ ] Permanent: Unless otherwise specified this is where general information and bills will be mailed.
[ ] Local/Off-Campus: Off-campus address (Residential Life approval required to live off-campus).
[ ] Billing: If you want bills sent to an address other than your permanent home address.

New address:

Address _____

City _____ State _____ Zip _____ Country (if applicable) _____

New Permanent Home Phone:

Home Phone (include area code) _____

Change of Name

When submitting a request for a change of name the appropriate supporting documentation must accompany the request. Appropriate supporting documentation is granted by governmental agencies. Documents typically include but are not limited to marriage licenses, legal name changes, passports, or divorce degrees. List your new official name below:

Last Name _____ First Name _____ MI _____

Change of Social Security Number (SSN)

You must provide your original social security card and a photo ID for verification of this request. List your new SSN below:

New Social Security Number _____

Signature and Date

I hereby request any and all of the above changes (this form will not be processed without your signature).

Name _____ Date _____