

Student Information Change Form

Current Name and Personal Information

First Name:	Last Name:		Middle Initial:
RAM ID or Last 4 of SSN:	Date of Birth:		
1) Change of Mailing Address		You may submi	it a change of address request to regoffice@farmingdale.edu
Street Address			
City	State	Zip Code	Country (If other than USA)
Telephone Number			
2) Legal Name Change	•	· ·	vappear on your records. Requires two -forms of documentation: e document must be U.S. Passport or State Issued Drivers' License
			ame. I do not wish to update my user name.
New Name:		Former Name:	
3) Request to Add a Preferred Name			
SUNY Farmingdale recognizes the needs of stude to protecting student privacy in order to ensure t	•		ffers from their legal status. We are also committed y.
Click here to review the Policy and submit your re	equest.		
4) Date of Birth Correction		This	request cannot be emailed. Requires one form of documentation: Birth Certificate, State Issued Drivers' License or Passport.
Date of Birth:			
5) Change of Social Security Number			This request cannot be emailed. Requires documentation: Social Security Card
New SSN:	For	mer SSN:	
6) Gender Identity			To be completed if requesting a change
Check one: Gender Identity: F, M, X			
7) Change of Preferred Pronouns			
Chosen pronouns are used to respect the way pronoun that an individual would like others gender-inclusive pronoun when talking to or	to use when talking to or about th	nat individual. Some people	prefer others to use a gender-neutral or
Desired Pronouns: Example: she/her/hers or he/	/him/ his		
Signature of Student			
be valid original documents or certific	use of these documents you red copies. By signing below, yo	must come in person M ou understand without	License should not be emailed. To on-Fri, 8:30-4:00. Documentation must providing the proper documentation the aformation is accurate. Please allow 3-4
Signature:			Date: