Date:

THE OFFICE OF GRADUATE ADMISSIONS

Shuster Hall, Room 158 250 Bedford Park Blvd West Bronx, NY 10468 Phone: 718-960-8777 Fax: 718-960-5860 lehman.edu

GRADUATE CHANGE OF BIOGRAPHICAL DATA FORM

- All requested changes must be accompanied by TWO (2) forms of support documentation
 - o Legal documents (i.e., marriage license, court order, divorce decree, birth certificate)
 - Usage documents: A picture i.d. (i.e. New York State Driver's License, passport, or visa/green card).
- A change of ID# requires a **signed** social security card.
- A change of date of birth requires a birth certificate or passport.

ID Change:			
Information as it appears on PRESENT Lehman		CHANGE TO: (fill in appropriate information)	
records			
Assigned ID # or Social Security Number		Assigned ID # or Social Security Number	
Tibbighted 12 % of Sectial Security 1		Tiblighta 15 % of Section Sec	
Date of Birth Change:			
Information as it appears on PRESENT Lehman		CHANGE TO: (fill in appropriate information)	
records			
Month/Day/Year		Month/Day/Year	
		<u> </u>	
Name Change:			
Information as it appears on PRESENT Lehman		CHANGE TO: (fill in appropriate information)	
records		,	,
Last Name		Last Name	
Last Ivame		Last Name	
E' AN		Final Name	
First Name		First Name	
Middle Name		Middle Name	
Date: Student Signature:			
This form will not be processe	ed without the student's	signature * Only original docu	iments will be accepted
	D	1 .1 . 1.	
	Do not write be	elow this line	
EMPL ID:	For Official Use O	nly	
EMI E ID.	Legal Document	S	
☐ Marriage License	□ Divorce Decree	☐ Court Order	☐ Birth Certificate
	Usage Document		
☐ NYS Driver License	□ Social Security Card	☐ Passport	□ VISA/Green Card

Staff Signature:

