

# University of Houston Clear Lake

## Personal Information Change Form

**Check here if:**  You are a new student to UHCL or you have submitted/will submit a new application for the semester you are applying for. Submit this form to the **Office of Admissions** by fax to: **281-226-7230** or scan and email to: **admissions@uhcl.edu**.

**Check here if:**  You are already enrolled as a student at UHCL; or, you are eligible to re-enroll without submitting a new application for the semester you are applying for. Submit this form to the **Office of the Registrar** by fax to: **281-226-7230** or scan and email to: **registrar@uhcl.edu**.

You may change Personal Information if the current UHCL record of your name was originally taken from your application for admission purposes and only if: 1) You have married or divorced (a copy of marriage license or portion of divorce decree indicating new name must be provided), 2) You have changed your name by court order (a copy of the court order must be provided), and/or 3) Your legal name is listed incorrectly and satisfactory evidence exists for its correction (birth certificate, valid passport, etc., must be provided) **Please allow 3-5 business days to process your request.**

**List your name as it is currently listed on UHCL records:**

\_\_\_\_\_

Last Name (Print)	First	Middle	Student ID number
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**Check the item(s) that you want changed and list the updated information.**

To update your mailing address, phone number and personal email address login into your E-Services account online at [www.uhcl.edu/eservices](http://www.uhcl.edu/eservices).

**Name:** Check reason for name change request:

1) Correction of error     2) Court order     3) Divorce     4) Marriage     5) Other

**I request that my UHCL official records be changed to reflect my legal name as listed below:**

\_\_\_\_\_

Last Name (Print)	First	Middle
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**Social Security Number:** Contact the Student Business Services Office to find out how updating this number will affect your IRS 1098-T Form.

**Check reason for Update/Change:** (A copy of your SSN or Taxpayer Id card must be included)

1) Correction of error     2) New Social Security Number     3) New Taxpayer ID Number

Change from: \_\_\_\_\_ Change to: \_\_\_\_\_

**Date of Birth:** A copy of your Current Driver's License, State ID, or Birth Certificate must be included.

\_\_\_\_\_

Month	Day	Year
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\_\_\_\_\_  
**STUDENT SIGNATURE (REQUIRED)**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PHONE NUMBER**

*A copy of a photo ID must be attached to this form when submitted.*

*Forms submitted without a clear copy of a photo ID will not be processed.*

**Processed by Admissions**

**Initials:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Processed by Registrar Office**

**Initials:** \_\_\_\_\_ **Date:** \_\_\_\_\_

6/2017