UNF UNIVERSITY of NORTH FLORIDA

Personal Information Update

UNF ID Number: N_____ **Name**: _____

Have you applied to graduate this semester? Yes ☐ No ☐ *(If yes, and you want to change the name on your diploma please also submit a paper Graduation Application)*

☐ **Legal Name Change**: Photo ID and documentation **must** be provided for a legal name change.

Acceptable documentation includes: divorce papers showing legal name, driver's license, court order, Social Security card, state ID, passport

New Legal Name:_____
Last First Middle

If you are a current UNF employee submitting a name change request (A&P, USPS, OPS, graduate assistant or student employee) you **must** also complete a Human Resources Name Change and a W-4 form. Submit these forms to the Office of Human Resources (HR) along with an original Social Security card reflecting your new, legal name. To obtain the HR Name Change form visit www.unf.edu/hr or stop by Human Resources–Building 1, Room 1101.

☐ **Preferred First Name Change:** No documentation is required. Photo ID must be provided to confirm identity. Your preferred first name will appear on UNF email, Canvas and the UNF Directory only.

Preferred First Name:_____

☐ **Social Security Number Correction:** Photo ID and a valid Social Security card with your correct number **must** be provided.

Old Social Security Number: _____ - _____ - _____

New Social Security Number: _____ - _____ - _____

☐ **Date of Birth Correction:** Documentation and photo ID **must** be provided. _____/_____/_____
MM DD YYYY

☐ **Gender Correction/Update:** Photo ID and documentation must be provided (e.g. driver's license, state ID, court order, etc.)

☐ **Female** ☐ **Male**

☐ **Personal Pronoun Update**: No documentation is required. Photo ID must be provided to confirm identity.

☐ **He/Him/His** ☐ **She/Her/Hers** ☐ **They/Them/Theirs**

☐ **Address Change:** Photo ID must be provided to confirm identity.

Mailing Address: _____

City, State, Zip: _____

County: _____ **Country**:_____

☐ **Telephone Number Change:** Photo ID must be provided to confirm identity.

Home: (_____)_____ **Cell:** (_____)_____

☐ **Personal Email Address Change:** Photo ID must be provided to confirm identity._____

☐ **New Emergency Contact: Name:**_____**Relationship:**_____
Student's photo ID must be provided.

Address: _____

City, State, Zip: _____ **Country**_____

Telephone: (_____)_____ **Alternate #:**(_____)_____

Student's Signature:_____ **Date:**_____

PLEASE NOTE: *This form and applicable documentation must be submitted in-person to One-Stop Student Services located in Hicks Hall (Bldg. 53, Suite 1700). If you are an online student or are otherwise unable to submit this form in-person, you may email from your UNF account, notarized copies of your ID, this form and other applicable documentation to* ***records@unf.edu****. Documents that are not notarized may not be processed. Documents submitted from a non-UNF email will not be processed.*

ID verified by:_____ Processed by:_____

Date:_____ Revised: 08/01/2020 Date:_____