



Student Information Change Form

DISCLAIMER: Please download the form, fill out all information, SAVE the form to your computer and then submit your completed application to the Office of Academic Records.
(Failure to save the form will result in a loss of all typed information)

Last Name: _____ First Name: _____ CWID No: _____

Phone Number: _____ Email Address: _____

Do you meet any of the following: Student Athlete Veteran International OSD TAA WIOA

Name Change:

Previous Name (First, Middle, Last): _____

New Name (First, Middle, Last): _____

Reason for Name Change:

- Marriage Date: _____
- Divorce Decree Date: _____
- Certified Court Order Date: _____
- Other Date: _____

Please provide legible copies of the appropriate documentation listed below to complete your name change:

- Driver's License (showing new name) or Government issued Photo ID, and
- Marriage License
- Court Document (Divorce/Legal Name Change)

Social Security Number Change:

Please contact the Academic Records Office for more information on how to change your Social Security Number: 724-938-4434 or academicrecords@calu.edu

Address Change:

Old Address:

| |
|--------------------------------------|
| Street: _____ |
| City: _____ |
| State: _____ Zip: _____ Phone: _____ |

New Address:

| |
|--------------------------------------|
| Street: _____ |
| City: _____ |
| State: _____ Zip: _____ Phone: _____ |

Please provide legible copies of the appropriate documentation listed below to complete your Address change:

- Driver's License (showing new address) or Government issued Photo ID

Please Note: If you are changing your address from out-of-state to in-state, this change request does not automatically change your residency, you must submit a "Change of Residency" request. Please contact: academicaffairs@calu.edu for more information.

If your request is from in-state to out-of-state, your residency will automatically be changed to out-of-state which will increase your tuition. This change will take place in the next available semester.

Student Signature

Date

Please forward signed form to Academic Records for processing. ***

Email: academicrecords@calu.edu