

NAME CHANGE OR SOCIAL SECURITY NUMBER CORRECTION FORM

Instructions: Please complete this form with the required documentation attached and return to the address above. Forms without appropriate documentation attached will not be processed. Students changing their names after the semester begins should inform their instructors of their name changes.

PLEASE PRINT CLEARLY.

Current Name on Record: _____
Last First Middle

UH ID Number: _____ Daytime Phone Number: _____

UH Email Address: _____ @ hawaii.edu

CHANGE SOCIAL SECURITY NUMBER from: _____ - _____ - _____
ATTACH a copy of Social Security Card **to:** _____ - _____ - _____

CHANGE NAME: _____
Last First MI

CHECK ONE and PROVIDE APPROPRIATE DOCUMENTATION:

- Correct error in spelling
(Birth Certificate, State ID, US Military ID, Passport, U.S. Resident Alien Card)
- Change due to marriage
(Marriage Certificate)
- Change due to divorce
(Divorce Decree)
- Legal Change of Name
(Court Petition for Name Change, U.S. Naturalization Certificate)

STUDENT SIGNATURE: _____ Date: _____

FOR OFFICE USE ONLY

Banner ID: _____ Completed By/Date: _____

Notified: VA FA HONDA UH-ITS Folder Changed By/Date: _____

Student Type: Currently Enrolled Returning First-time New/Transfer