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PRINT CLEAF	RLY:	
NUID/SSN:	Name: (currently on record)	
Phone:	Email:	
	PERSONAL RECORD:  In the following and attach the appropriate legal documen	tation:
	Driver's License, State ID, Birth Certificate, Passport, Visa, cree or other government issued document	Certificate of Marriage,
First	Middle Last	t
	f <b>Birth:</b> Driver's License, State ID, Birth Certificate, Passp ent issued document YYY	ort, Visa or other
Social S	Security Number (SSN): Social Security Card	
	' (Legal Sex): Driver's License, State ID, Passport, Visa ent issued document	, Court Decree or other
By signing this document, I certify that the above change(s) have been authorized through appropriate legal action and/or documentation.		
Student Signa	ture	Date

