



**Auburn University at Montgomery**

The Office of the Registrar  
P.O. Box 244023 Montgomery, AL 36124  
Phone: (334) 244-3125  
Fax: (334) 244-3993

## Change in Student Information

PRINT your information as it *currently* appears on your student record.

NAME: \_\_\_\_\_  
Last First Middle

STUDENT ID NUMBER: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

### COMPLETE ALL THAT APPLY

**PART 1 - NAME CHANGE** (Marriage Certificate, Divorce Decree, or other Government Document **MUST** be provided)

NEW NAME: \_\_\_\_\_  
Last First Middle

### PART 2 - ADDRESS/TELEPHONE CHANGE

Address: \_\_\_\_\_ Apartment Number: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**PART 3 - SOCIAL SECURITY NUMBER CHANGE OR CORRECTION** (Social Security Card **MUST** be submitted in person at the Registrar's Office)

Please check box indicating you wish to update your Social Security number.

*I authorize Auburn University at Montgomery to make the requested changes to my student record.*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Banner Processed by: \_\_\_\_\_ Date: \_\_\_\_\_