



Former Student Request for Change of Record

(This form will not be accepted for current students)

Student Information			
Last Name <i>(Currently on Record)</i>	First Name <i>(Currently on Record)</i>	Middle Name / Initial <i>(Currently on Record)</i>	Suffix
Ohio State ID	Ohio State Name.#	Date of Birth <i>(MM/DD/YYYY)</i> <i>(Currently on Record)</i>	

Certification	
<input type="checkbox"/> I have included all requested documentation.	
<input type="checkbox"/> I affirm that the information provided on this form is complete and true.	
<input type="checkbox"/> I understand that I am subject to The Ohio State University Code of Student Conduct and that furnishing false information on this form may result in cancellation of admission or registration, or both.	
_____ Legal Signature	_____ Date

Name Change			
<input type="checkbox"/> Marriage Name Change	<input type="checkbox"/> Divorce Name Change	<input type="checkbox"/> Legal Name Change	<input type="checkbox"/> First Name Change <input type="checkbox"/> Middle Name Change
Documentation Required for Name Changes: Marriage – Copy of marriage certificate, marriage license, court entry, or valid U.S. passport*. Divorce – Copy of Divorce Decree, court entry, order of legal name change, or valid U.S. passport*. Legal Name Change – Court order of legal name change or valid U.S. passport*. First Name Change (ex. From variation to legal name) – Copy of birth certificate or valid U.S. passport*. Add or Change Middle Name/Initial – Copy of birth certificate or valid U.S. passport*.			
NEW Last Name	NEW First Name	NEW Middle Name/Initial	Suffix

Social Security Number Change	
<i>Requests for changes to your Social Security Number must be returned in person. Please do not fax or email Social Security Number requests.</i>	
<input type="checkbox"/> Social Security Number Change	
Documentation Required for Social Security Number Changes: Copy of Social Security Card.	
_____ INCORRECT Social Security Number	_____ CORRECT Social Security number

Date of Birth Change	
<input type="checkbox"/> Date of Birth Change	
Documentation Required for Date of Birth Changes: Copy of birth certificate or valid U.S. passport*.	
_____ INCORRECT Date of Birth <i>(MM/DD/YYYY)</i>	_____ CORRECT Date of Birth <i>(MM/DD/YYYY)</i>

*If non-U.S. passport is provided, a copy of your U.S. visa document is also required.

Documentation must be in English or have a translation on the form.

Revised: 09/11/2017

To return this form:

Email to: registrar@osu.edu (Do not fax/email Social Security Number Changes)

Mail to: University Registrar, Attn: Academic Records, Room 540, 281 West Lane Avenue, Columbus, Ohio 43210