

SOCIAL SECURITY NUMBER CHANGE FORM

Are you a current employee with the University (AS & Foundation not included)? Yes* _____ No _____

***If yes, you will need to fill out a change of SSN form in Human Resources instead. We can not process the change in our office.**

Please Print Complete All Items Above Solid Line ID # _____

Social security number shown on your CSU, Chico record: _____ -- _____ -- _____

Name shown on your CSU, Chico record: _____
Last First Middle

Enrolled this semester? Yes _____ No _____

Your academic record should reflect your legal name.

OFFICE USE ONLY

- Record
- PS
- IN
- Comments

Social security number changed to: _____ -- _____ -- _____

***Please include proof of SSN with request.**

Student must sign here to authorize changes
Phone 530-898-5142 Fax 530-898-4359

Date

Student Records and Registration
CSU, Chico 08/09