

**PERSONAL DATA CHANGE FORM**

**please print clearly and complete this section and all other sections that apply**

Current Name:

\_\_\_\_\_ (first)

\_\_\_\_\_ (middle)

\_\_\_\_\_ (last)

UMID Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Name**

*Required documentation for a name change/correction: Social Security card, marriage certificate, court order, driver's license, state identification card, or passport*

Update Name:

\_\_\_\_\_ (first)

\_\_\_\_\_ (middle)

\_\_\_\_\_ (last)

**Social Security Number**

*Required documentation for a social security number addition/correction: Social Security card or most recent W2 from a non-University of Michigan employer*

Social Security Number: \_\_\_\_\_

**Birth Date**

*Required documentation for a birth date correction: driver's license, state identification card, passport, or birth certificate*

Correct Birth Date: \_\_\_\_\_ Incorrect Birth Date: \_\_\_\_\_

**Sex**

*Required documentation for a change: driver's license, state identification card, passport, or birth certificate*

Correct Sex: \_\_\_\_\_

**Immigration Status/Citizenship**

*Required documentation for an immigration status update: Passport, Green Card, Certificate of Naturalization, Notice of Action letter from USCIS*

Change from: \_\_\_\_\_ Change to: \_\_\_\_\_

Permanent Resident USCIS# \_\_\_\_\_

**TO BE COMPLETED BY RO STAFF MEMBER ACCEPTING FORM**

Relation to UM (circle all that apply): current student former student ever employee

Paper Supplements: Yes No Provide link for International Center: Yes No

Signature of staff member \_\_\_\_\_ Date: \_\_\_\_\_

**TO BE COMPLETED BY INTERNATIONAL CENTER**

Terminated in MPathways? YES NO Ready to file in Students File? YES NO

Checked in RTI? YES NO Staff Member Initials: \_\_\_\_\_ Date: \_\_\_\_\_