



Office of the University Registrar
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REQUEST FOR DATA CORRECTION

PLEASE PRINT CLEARLY

Please complete the appropriate section.

Accuracy is absolutely necessary.

Student ID:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Date:	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
Last Name:							First Name							M.I.		

SECTION I: CHANGE OF ADDRESS

A Change in address does not indicate a change in Residency Status

Please note that only CMRC (no other dorms) can be used as your home address.

Previous Address:
Street: _____
City/Town: _____ State: _____ Zip Code: _____
New Address:
Home Address: _____ Apt. # _____
City/Town: _____ State: _____ Zip Code: _____ County: _____
Daytime Number: (____) _____ Evening Number: (____) _____

SECTION II: CHANGE OF NAME

Social security card and one of the following must accompany change of name: *state/government photo identification, birth certificate, marriage certificate, divorce decree, court petition, or passport.*

Previous Name:
Last Name: _____ First Name _____ Middle Name _____
New Name:
Last Name: _____ First Name _____ Middle Name _____
Reason for change: _____

SECTION III: CHANGE OF SOCIAL SECURITY NUMBER

You must attach a copy of a government issued social security card.

Previous SS#:	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>
New SS #:	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>

NO CHANGES WILL BE COMPLETED WITHOUT PROPER DOCUMENTATION.

I certify that the information provided is complete and accurate.

Student's Signature: _____ Date: _____

Processed by _____ Date _____