

Miami Dade College OFFICE OF ADMISSIONS AND REGISTRATION RECORDS CHANGE FORM

Date:				
Empl ID#:				
1. Name Change				
From:				
Last		First		Middle
To:				
Last		First		Middle
2. Social Security Numb	er Change			
From:		To:		
3. Date of Birth Change	(MM/DD/YY)	4. Ge	nder Chan	age
From: To:		From: To:		
5. Immigration Status Cl	nange			
From:		To:		
o US Citizens		o US Citizens		
o Permanent/Tempo	Permanent/Temporary Residents			
o Parolee/Refugee/A	o Parolee/Refugee/Asylee			
Other		0	VISA	
o Other		O	Other	
I authorize the above cha	inges:			Date:
I authorize the above cha	Studen	nt Signatu	re	
FOR OFFICE USE ONL	Y			
Received by:	Date:			
Processed by:	Date:	Date:		



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REQUIRED DOCUMENTATION

No single document shall be conclusive and all documentation is subject to verification.

1. Name Change

Gov/state picture ID (name on the picture ID must match all other documents) and one of the following documents.

- a. Marriage License
- b. Divorce Final Judgment
- c. Naturalization
- d. Court Order
- e. Birth Certificate
- f. U.S. Passport

2. Social Security Number Change

Government/state picture ID (name on the picture ID must match all other documents) and original Social Security Card signed by the holder (if 18 years and older).

3. Date of Birth

Government/state picture ID (name on the picture ID must match all other documents) and one of the following documents.

- a. Birth Certificate
- b. Naturalization Certificate or valid US passport.

4. Gender Change

a. Government/state picture ID (name on the picture ID must match all other documents) and court order.

5. Immigration Status Change

a. Gov/state picture ID (name on the picture ID must match all other documents) and immigration documentation.