



# Biographical Changes Request:

*Legal Name, Race, Social Security Number, Legal Sex, Name-in-Use*

In-person requests require this form with all **original** documents required. Mailed requests require **notarized** copies of your documents to be sent to the address above. **\*\*NOTE: Forms are not accepted by fax or e-mail.\*\***

**Name (as it currently appears in OSU's system)** \_\_\_\_\_

**OSU ID#** \_\_\_\_\_ **Email address** \_\_\_\_\_

Carefully read all information and list of required documents following this form.

**Previous Information:**

*Only fill out applicable information for changes requested.*

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle \_\_\_\_\_

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

Legal Sex:  Male  Female  Prefer not to answer

Are you Hispanic or Latino?  Yes  No

**RACE**

What is your race (choose one or more)?

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

Racial or ethnic subgroup: \_\_\_\_\_

Name-in-Use: \_\_\_\_\_  
(first name only)

**New Information:**

*Only fill out applicable information for changes requested.*

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle \_\_\_\_\_

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

Legal Sex:  Male  Female  Prefer not to answer

Are you Hispanic or Latino?  Yes  No

**RACE**

What is your race (choose one or more)?

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

Racial or ethnic subgroup: \_\_\_\_\_

Name-in-Use: \_\_\_\_\_  
(first name only)

\* Please check this box if you are filing a name change to align with your gender identity. This information will be used to provide a fee waiver for a new OSU ID card.\*

By signing below, I request that OSU change my student records to match the new information listed above. I have included all required documents to support this change. I further state that my changes are not for fraudulent purposes or the avoidance of creditors.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*This form is for students (past & current) who are not employed by OSU. OSU employees must contact Human Resources to make biographical changes.*



## Required Documents and Information

### LEGAL NAME CHANGE - Provide us with:

- Current students:** Your current OSU ID card. *If you are an Ecampus student without an OSU ID, please send a notarized copy of your current government issued photo ID.*
- Former students:** Your current government-issued identification document with photo and full legal name and signature. If sending via mail, include a notarized copy of your identification document.

**AND**

Copy of an official document indicating a change from your **FORMER** to your **CURRENT** name. The **FORMER** name on your OSU records must match the former name on this document. Examples include:

- Certified copy of an official government-issued marriage certificate
- Naturalization papers
- Legal name change decree – US city, county, or state court issued
- Adoption decree – US city, county, or state court issued
- Divorce decree – US city, county, or state court issued

### LEGAL SEX CHANGE – Provide us with:

- Original or notarized copies of court documentation of legal sex change and photo identification.

*If you have questions, please call the Office of the Registrar at 541-737-4331.*

*Please read legal name changes at <http://registrar.oregonstate.edu/biographical-information-change-requests>*

### SOCIAL SECURITY NUMBER CHANGE - Provide us with:

- A copy of the new Social Security card with the new number and a photo ID.
- If mailing in your request, notarize this form requesting the Social Security number change and include a notarized copy of the new card and photo identification. Our office destroys copies of Social Security cards upon receipt and verification.

*Please read about Social Security changes at <http://registrar.oregonstate.edu/biographical-information-change-requests>*

### NAME-IN-USE CHANGE REQUEST:

Students wishing to change their **first name** without legal documentation may do so by including their name in the 'name-in-use' box in the New Information box on page 1 of this document. **\*\*Please note that these changes will not automatically update in Student Health Service's system. If you would like your name-in-use to appear at SHS, please contact [Martha.Adams@oregonstate.edu](mailto:Martha.Adams@oregonstate.edu)**

*Please read about non-legal name changes at <http://registrar.oregonstate.edu/biographical-information-change-requests>*