

BIO/DEMO CHANGE

This form is for applic	ants and new students only. If you are	e current or former studen	t, please contact the Records Office.	
Campus Identifica	tion Number (CIN):			
Name currently	on Cal State LA records:			
Phone: Email:				
documentation to	s, the Office of Admissions and verify information. With this re under 18 years old, a school-is:	equest, attach a copy	of your current government-issue	 ed
PLEASE COMPLETE ON	NLY THE SECTION(S) TO BE CHANGE	D/CORRECTED:		
(NOTE: For fine First: Middle: Last: SOCIAL SECUR (IMPORTANT:		as it appears on the SS Tax Identification Nut	imber (ITIN) UPDATE/CORRECTION	٦.)
	TH (DOB) CORRECTION			
Please correct m	y birthdate to: [month]	[day]	[year]	
	nge information that is displayed			
misrepresentation will	ndividual represented in the docu		erstand that false statements or General and the U.S. Attorney General	
Student Signature:		Da	te:	

ATTACH SUPPORTING DOCUMENTS

ALL DOCUMENTATION MUST MATCH THE PRIMARY/LEGAL NAME IN YOUR STUDENT RECORDS (OR OFFICIAL RECORDS)

- ALL REQUESTS MUST INCLUDE A COPY OF YOUR GOVERNMENT-ISSUED PHOTO ID.
- NAME CHANGE Marriage License, Divorce Decree, Court Order for legal name change, or Naturalization Certificate.
- NAME CORRECTION Adoption/Birth Certificate, passport, or social security card.
- SSN or ITIN CHANGE Signed Social Security Card or Signed Individual Tax Identification Card (or IRS ITIN verification letter)
- DATE OF BIRTH CORRECTION Adoption/Birth Certificate or passport
- OTHER CHANGE Please specify requested change and provide supporting official documentation as appropriate.