Reset Form

University of Alaska
Change Form

MAU/Major Administrative Unit (circle one)	Department
UAA UAF UAS SW	
Last Name / First / M.	
Social Security Number/Student ID	Date of Birth (mm dd yy)

Indicate all areas to change:

☐ Student Related ☐ Vendor Related

☐ Employee Related ☐ Applicant Related ☐ Other _____

Address:

Is this a new address? ☐ Yes* ☐ No

* Changes to Employee-related address will affect mailing of pay statement and W2.

Mailing Address: _____

_____

Please print clearly

City: _____

State: _____ Zip: _____ - _____

Phone: ( ) _____ Type: _____

Phone: ( ) _____ Type: _____

☐ Check here if phone number is for hard copy file records only - not to be entered on the Banner system.

☐ If permanent student address has changed, check here and indicate changes on the back of this form.

Indicate Changes:

☐ Name

A name on official records at the University must be the full legal name. A change of name request MUST be supported by legal documentation, i.e., Social Security card (required for employee-related changes), marriage certificate, dissolution or divorce decree, a court order, or a driver's license.

New Name: _____ (Last / First / M.)

Old Name(s): _____ (Last / First / M.)

_____ (Last / First / M.)

☐ Marital Status

☐ Single (S) ☐ Married (M) ☐ Divorced (D) ☐ Separated (P) ☐ Widowed (W)

Signature: _____ **Date:** _____

Required for all changes

For University of Alaska office use only

DEPT:	TYPE:	ENTERED BY:	DATE:	FORWARDED TO:
Human Resources	HR			
Student				
Vendor				