

## **OFFICIAL STUDENT NAME AND INFORMATION**

## Please print all information legibly.

Please provide your up-to-date, legal full-name (note, that if your name has changed, you must provide a marriage certificate, court papers, license or social security card as proof of name change, and your name will be recorded as given below. Please note that you will not need to provide documentation to update your preferred first name, but you must provide documentation for any change to your primary legal name.

Student ID #	nt ID # Date of Birth		Preferred First Name	
First	 Middle	 Last		
Are you a student	employee? Yes	No		
	and student ID#, you only ing in what is unnecessary		he information that needs	
Update Address				
			Address Type —	
Street Address			Primary	
City	State ZIP/Postal Code C	Country	—— Mailing	
City	State ZIF/FOStal Code C	ouriti y	International	
Update Phone			Billing	
Home Phone	Cell/Mobile Phone			
Update Unofficia	l Email			
	@			
Unofficial email addr	ress			
	munications from Salem St ssible through Navigator.)	ate University are	sent to your Salem State	
Signature			 Date	
	OFFICE U	SE ONLY		
	3.1702.0			
Entered by		Date		