

**Change of Student's
Personal Information**

Lakeland ID Number (LID)

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Last Name: _____ First Name: _____

- Address/Telephone Change** - *A change to a Lake County address does not automatically change residency status. You must submit a Request for Change of Residency form and acceptable documentation to the Registrar for review and approval. Fees will only be adjusted prior to the start of the term.*

New Address: _____

City: _____ State: _____ Zip: _____ County: _____

Telephone: (_____) _____ Home Cell Work

- Name Change** - *You must submit a copy of your driver's license or state-issued ID and a legal form of identification that displays your new name. Appropriate forms of documentation include: a birth certificate, a marriage certificate, a divorce decree, a court order, federally-compliant driver's license, valid passport or naturalization papers.*

Former Name: Last: _____ First: _____ Middle: _____

New Name: Last: _____ First: _____ Middle: _____

Reason for change: Marriage Divorce Misspelling/Correction Naturalization Other _____

Current Personal Email Address: _____

- Degree/Certificate Program Change**

New Program (Name and Code): _____ Degree Certificate

- Birthdate Change** - *You must submit a driver's license and birth certificate or federally-compliant ID for verification.*

New Birthdate: Day: _____ Month: _____ Year: _____

- Preferred Personal Pronouns Change**

He/Him/His She/Her/Hers They/Them/Theirs Other _____

- Social Security Number Change** - *You must submit a copy of your Social Security card for verification.*

New Social Security Number: _____ - _____ - _____

- Change in Confidentiality**

Confidentiality: Pursuant to the 1974 Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99), student directory information may be shared with third parties without the student's consent. Student directory information includes name, address, telephone number, verification of enrollment, photograph, dates of attendance, verification of graduation and date of graduation, degree and major earned, special awards/honors earned, hometown, high school and if a member of an athletic team, the student's height, weight, sports team and sports statistics.

Do you want directory information to be kept confidential? No Yes

NOTE: If you select yes, a photo ID will be required to obtain or change any student information.

I verify that the above information is accurate to the best of my knowledge.

Student's Signature: _____ Date: _____