



STUDENT INFORMATION			
Student Name: As it currently appears		Date:	
Student ID number:		Track:	

**NEW INFORMATION**

**Check the item(s) you wish to change or correct:**

**Date the Below Changes Become Effective:** \_\_\_\_\_

New First Name: \_\_\_\_\_

New Last Name: \_\_\_\_\_

**A copy of an appropriate legal document such as a court decree or social security card showing the new name must accompany name changes.**

Address

Number, Street: \_\_\_\_\_  Apartment number: \_\_\_\_\_

City, State: \_\_\_\_\_  Zip code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_

Gender: Female  Male  Other  \_\_\_\_\_

**Instructions:**

Check the items you wish to change or update. Clearly print the new information, sign your name and return the form to the Registrar's Office at **registrar@pacifica.edu** or fax **805.565.3804**.

**A copy of an appropriate legal document such as a court decree or social security card showing the new name must accompany name changes.**

Revised 8/2020

**Required Signatures:** If emailing form, student must submit this form from their My.Pacifica.edu student email account.

\_\_\_\_\_  
Student Date  
 I certify that my typed name is my authorized signature

\_\_\_\_\_  
Registrar Date