

- Requires at least TWO VALID and ORIGINAL forms of Identification (see choices below)
- Both forms of the required identification must show the NEW name
- At least ONE form of required identification must be a photo ID

<u>Last</u> Name (Current Name on SB Records)	First Name (Current Name on SB Records)		Stony Brook ID (as indicated on your Stony Brook ID card)	
Home Phone number with area code	Daytime (work) phone with area code		Today's Date MM / DD / YYYY	
_	() -		/ /	
NEW LAST NAME (for ils a cons)	/ /		, ,	
NEW LAST NAME (family name)				
NEW FIRST NAME		NEW MIDDLE NAME or MIDDLE INITIAL		
Are you CURRENTLY an EMPLOYEE at Stony Brook University? YES NO				
If you are a GA or TA or RA, you qual	ify as an employee.			
If you are a current employee, enter you	ur Social Security Number			
If current or former employee, comp	lote the entire form and sul	hmit ta Hui	man Resources Administration R	da Room
390. Bring a Social Security Card re		Uliiit to 11ai	man Kesuurces, Aummistration Di	iug., Koom
Current Employees with Health Insu	_	representa	tive in Benefits.	
	-			
Are you CURRENTLY a STUDENT a	•		☐ YES ☐ NO	
Are you a Health Sciences Program Stu	ident'?		☐ YES ☐ NO	
Are you a degree candidate?			☐ YES ☐ NO	
If YES, enter the TERM and YEAR you expect to graduate				(\$7
if TES, enter the TERM and TEM yo	u expect to graduate		Fall Spring Summer	(Year)
If your ONLY status is STUDENT, c	omplete this form and subr			
If your ONLY status is STUDENT, c Stony Brook University, Office of the	omplete this form and subre Registrar, Administration	Bldg., Roo	om 276 Stony Brook, NY 11794-11	01
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If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to H	omplete this form and subre Registrar, Administration SC Office of Student Service	Bldg., Roo ees, Level 2,	om 276 Stony Brook, NY 11794-11 , Room 271 Stony Brook, NY 1179	01
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If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to H	omplete this form and subre Registrar, Administration SC Office of Student Service RE	Bldg., Roo ees, Level 2,	om 276 Stony Brook, NY 11794-11 , Room 271 Stony Brook, NY 1179	01
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If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to HS STUDENT/EMPLOYEE SIGNATUS OFFICE USE ONLY	omplete this form and subre Registrar, Administration SC Office of Student Service RE TWO ID's REQUIRED: • at least one photo ID	Bldg., Roo ees, Level 2, D	om 276 Stony Brook, NY 11794-110 , Room 271 Stony Brook, NY 1179 ATE	01
If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to HS STUDENT/EMPLOYEE SIGNATUS OFFICE USE ONLY Driver's License	omplete this form and subre Registrar, Administration SC Office of Student Service RE TWO ID's REQUIRED: • at least one photo ID	Bldg., Roo ees, Level 2, D	om 276 Stony Brook, NY 11794-110 , Room 271 Stony Brook, NY 1179 ATE	01
If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to HS STUDENT/EMPLOYEE SIGNATUR OFFICE USE ONLY Driver's License Divorce/Marriage Certificate	omplete this form and subre Registrar, Administration SC Office of Student Service RE TWO ID's REQUIRED: • at least one photo ID	Bldg., Roo ees, Level 2, D	om 276 Stony Brook, NY 11794-110 , Room 271 Stony Brook, NY 1179 ATE	01
If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to HS STUDENT/EMPLOYEE SIGNATUR OFFICE USE ONLY Driver's License Divorce/Marriage Certificate Court Action	omplete this form and subre Registrar, Administration SC Office of Student Service RE TWO ID's REQUIRED: • at least one photo ID	Bldg., Roo ees, Level 2, D	om 276 Stony Brook, NY 11794-110 , Room 271 Stony Brook, NY 1179 ATE	01
If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to HS STUDENT/EMPLOYEE SIGNATUR OFFICE USE ONLY Driver's License Divorce/Marriage Certificate Court Action 1-20	omplete this form and subre Registrar, Administration SC Office of Student Service RE TWO ID's REQUIRED: • at least one photo ID	Bldg., Roo ees, Level 2, D	om 276 Stony Brook, NY 11794-116, Room 271 Stony Brook, NY 1179 ATE Stamp Date Received	01
If your ONLY status is STUDENT, c Stony Brook University, Office of the ***HSC Students: submit form to HS STUDENT/EMPLOYEE SIGNATUR OFFICE USE ONLY Driver's License Divorce/Marriage Certificate Court Action	omplete this form and subre Registrar, Administration SC Office of Student Service RE TWO ID'S REQUIRED: • at least one photo ID • copy the submitted ID's f	Bldg., Roo ees, Level 2, D	om 276 Stony Brook, NY 11794-116, Room 271 Stony Brook, NY 1179 ATE Stamp Date Received	01